MSF
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CHOKING GAZA

MSF's humanitarian supply activities in a context of collective torture

MEDECINS SANS FRONTIERES

Contents

Cover photo: **The Khan Younis area as seen from the Israeli side of the fence.**

GAZA © MSF

Acronyms used

AIDA	Association of International Development Agencies
COGAT	Coordination of Government Activities in the Territories
ERC	Egyptian Red Crescent
GHF	Gaza Humanitarian Foundation
ICJ	International Court of Justice
IDF	Israeli Defence Forces
IHL	International Humanitarian Law
INGO	International Non-Governmental Organisation
JHCO	Jordan Hashemite Charity Organization
JLOTS	Joint Logistics Over-the-Shore
LT	lead Time (international order process)
MSF	Médecins Sans Frontières/Doctors Without Borders
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
TS	Time Stamp (international order process)
UN	United Nations
UNRWA	United Nations Relief and Works Agency for Palestinian Refugees in the Near East
WFP	World Food Programme
WHO	World Health Organization

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Executive summary

Supplying humanitarian goods into the Gaza Strip has never been an easy task — especially since Israel imposed a land, sea and air blockade in June 2007, making effective humanitarian assistance very difficult. The humanitarian situation in Gaza deteriorated drastically as Israel began to respond to the attacks on Israel of 7 October 2023 by Palestinian armed groups, becoming one of near-apocalyptic horror. Humanitarian needs soared to unprecedented levels. Under international humanitarian law, Israel, as the occupying power, had a legal obligation to facilitate the delivery of humanitarian assistance. This obligation was further reinforced by a ruling of the International Court of Justice (ICJ) in January 2024. However, instead of facilitating access, Israel severely restricted humanitarian efforts, imposing obstacles to nearly every stage of the supply chain required to bring goods into Gaza.

This report draws on data collected by MSF, as well as first-hand experience, to shed light on the challenges faced by MSF teams in delivering timely emergency supplies in response to the extreme humanitarian needs in the Gaza Strip between 7 October 2023 and 19 January 2025 — the date the second ceasefire came briefly into effect.

Extremely poor security and working conditions severely undermined both the scale and quality of MSF's humanitarian response in the Gaza Strip during the period covered by this report. The territory's health system collapsed, leaving it completely incapable of meeting the population's needs. Most hospitals ceased functioning or operated only partially, and hundreds of health and aid workers were killed, including nine MSF staff members. After 7 October 2023 the interpretation of key principles of international humanitarian law — such as proportionality, precaution, necessity and the distinction between civilians and combatants — was stretched to an extreme that severely undermined the protection of civilians.

MSF teams were forced to evacuate healthcare facilities at least 14 times, and daily activities were carried out in constant fear of a fatal incident, since bombing attacks often occurred without prior warning. Conditions were very harsh for MSF international staff, but for Palestinian staff the situation was simply unimaginable. The vast majority lost at least one, and in some cases many, family members and/or close friends. Most also lost their homes, and many received repeated evacuation orders. Theft of supplies was substantial, not only as the predictable outcome of individual desperation, but more significantly on the part of organised armed groups, who allegedly operated with the acceptance — or even the tacit support — of Israel.

During the period covered by this report, Israeli authorities established a system for delivering humanitarian aid that was marked by arbitrariness, uncertainty, blockages, vetoes, delays and restrictions. Rather than enabling humanitarian action in good faith, the bureaucracy, inspections and

validation procedures imposed appeared designed to punish and demoralise a population already devastated by extreme and ruthless violence. Some of the restrictions were incomprehensible, and many of the procedures were unnecessary and ineffective from a humanitarian perspective. At best, humanitarian efforts in the Gaza Strip were subordinated to military and political objectives. At worst, they were deliberately obstructed, resulting in intentional deprivation. This approach was lethal — albeit in a more silent and insidious manner than bombs or bullets.

Like other organisations, MSF multiplied its efforts in the Gaza Strip. Between 7 October 2023 and 31 January 2025, MSF provided 549,000 outpatient consultations, 124,300 emergency room consultations, 34,300 individual mental health sessions, 34,200 patient admissions and 11,700 surgeries, and assisted 8,900 births. In the course of its operations, MSF managed to deliver nearly a thousand tonnes of medical and logistical supplies into the Gaza Strip. This figure demonstrates that access was not entirely blocked. However, many of these supplies arrived too late to meet the need for which they had been ordered, and more never arrived at all. MSF was unable to bring into the Gaza Strip the full component of supplies needed to meet the overwhelming demand it encountered. With more supplies, MSF could have done significantly more.

The quality, as well as the quantity, of care provided could also have been substantially improved by more satisfactory supply conditions. Due to severe shortages, MSF teams had to halt the distribution of various essential items. Therapeutic food for malnourished mothers and infants failed to arrive. Kits containing blankets, tents and thermal clothing, intended to help the population endure a harsh and rainy winter, were delivered six months late, in spring, when they were no longer needed. Critical materials for water treatment never arrived. Lacking necessary equipment, MSF teams had to improvise by manufacturing items locally using inadequate materials. Medical procedures requiring highly specific equipment, medicines and other products were, at times, carried out under conditions that would be shocking to any medical professional: from treating large numbers of crush injuries and burns with extremely limited supplies to amputating limbs without anaesthesia.

This report focuses on the arbitrariness and inefficiency of Israeli procedures and practices for authorising and managing the entry of essential supplies, as well as the pervasive subordination of fundamental humanitarian needs to military interests — factors that severely undermined the scale and quality of MSF's humanitarian response in the Gaza Strip.

During the period covered by the report, three corridors were used by MSF to supply its teams in Gaza with the humanitarian goods they needed: via Egypt, overland across Israel via Jordan, and via Israel itself. Each was subject at different times to closure by the Israeli (and in the case of Egypt, the Egyptian) authorities, as well as being subject to the vagaries of Israel's military operations and the collapse of public order in Gaza. Each also suffered from its own unique mix of bureaucratic and logistical obstacles.

Rules, procedures and requirements changed frequently, forcing humanitarian actors constantly to adjust and reconfigure their approaches. In the absence

of clear protocols or criteria, MSF and other humanitarian actors were left to rely on conjecture and trial-and-error to navigate the system. But the experience gained in the course of doing so proved unreliable. The same item was approved one day, rejected a month later, or held up for many months without explanation. This unpredictability made effective planning and adaptation extremely difficult. Many organisations avoided further attempts to send items that had previously been blocked or delayed — even though such items were often essential to delivering quality healthcare. Worse still, entire truckloads of supplies were sometimes denied entry because a single item in the shipment was flagged by Israeli authorities — often without prior indication and without giving MSF or others the opportunity to remove the item causing the problem. Without clarity concerning the reason for rejection, MSF could only speculate. A single unexplained rejection could reset the entire shipment, turning the process of delivering humanitarian aid into a Sisyphean effort.

The subordination of the most basic humanitarian needs — in a context of extreme urgency and human suffering — to political and military considerations was a major constraint on delivering an effective humanitarian response. The procedures for delivering humanitarian supplies were inefficient, opaque and overly burdensome. Access to areas where aid was most urgently needed was restricted, made conditional or deliberately instrumentalised. The politicisation and lack of clarity regarding the entire process of delivery of humanitarian aid affected not only MSF and other humanitarian international non-governmental organisations (INGOs), but also state authorities in Egypt and Jordan, as well as international institutions such as the UN. Moreover, hostility towards the provision of aid to the Palestinian population was most acutely targeted where it caused the greatest harm — against the UN Relief and Works Agency for Palestinian Refugees in the Near East (UNRWA), the backbone of humanitarian assistance in the Gaza Strip.

Throughout the period covered by this report, people were trapped, unable to flee, and subjected to a form of collective torture in the open air, broadcast to the world by the global media despite the Israeli authorities' restrictions on foreign reporters. Even the limited relief that humanitarian actors were still able to provide was severely obstructed. Delivering life-saving supplies into the Gaza Strip was sometimes impossible, and when possible, humanitarian organisations struggled to navigate the Israeli authorities' blockades, delays and restrictions on aid. Unhindered access and smooth delivery were rare exceptions. This obstruction of humanitarian aid was a kind of deadly suffocation. From 7 October 2023 to the January 2025 ceasefire, this deliberate choking of the aid supply probably cost many people their lives.

I. Introduction

The Gaza Strip has witnessed few periods in which the humanitarian situation of its population was not deeply concerning. Accumulated decades of occupation, successive Israeli military operations, internal fighting and years of blockade had already devastated living conditions well before 7 October 2023.

Supplying humanitarian goods into the Gaza Strip has never been an easy task — especially since Israel imposed a land, sea and air blockade in June 2007. From that date, Israeli authorities began to inspect and approve all shipments entering Gaza at designated border crossings. Certain items were banned under the designation of "dual use" goods — products deemed by Israel to have potential military as well as civilian/humanitarian applications — and Israel took and retained control over what and who could enter and leave the Gaza Strip. According to the UN Office for the Coordination of Humanitarian Affairs (OCHA), as of August 2023:[1]

> "Despite some easing of import restrictions since 2021, the remaining limitations continue to hinder access to livelihoods, essential services, and housing, disrupting family life and undermining people's hopes for a secure and prosperous future. The situation has been compounded by the restrictions imposed by the Egyptian authorities at Rafah crossing."[2]

On 7 October 2023, Palestinian armed men launched a series of attacks, killing over 1,100 Israeli civilians, members of the Israeli military and security forces and foreigners, and taking around 250 hostages, according to Israeli social security data.[3] In response, Israeli forces initiated a military campaign that, as of 28 July 2025, had killed 60.000 and displaced the vast majority of the Gazan population, according to the Ministry of Health in Gaza.[4] As of 1 December 2024, 69% of all structures in the Strip had been destroyed

1 See press releases, interviews, testimonies, project updates, op-eds, statements and detailed reports produced by MSF since 2000 at https://www.msf.org/palestine

2 OCHA, "Movement in and out of Gaza: update covering August 2023", 18 September 2023, https://www.ochaopt.org/content/movement-and-out-gaza-update-covering-august-2023

3 *France24*, "Israel social security data reveals true picture of Oct 7 deaths", 15 December 2023, https://www.france24.com/en/live-news/20231215-israel-social-security-data-reveals-true-picture-of-oct-7-deaths

4 Mallory Moench, "More than 60,000 people killed in Gaza during Israel offensive, Hamas-run health ministry says", *BBC News*, 29 July 2025, https://www.bbc.co.uk/news/articles/cwyeg5x3nj0o

or damaged, including 92% of housing units.[5] Israel also imposed a total blockade on Gaza — similar to the one already put in place but far more severe.

On 9 October, Israel's Defence Minister Yoav Gallant declared: "I have ordered a complete siege on the Gaza Strip. There will be no electricity, no food, no fuel, everything is closed. We are fighting human animals and we are acting accordingly".[6] The following day, Israeli Defence Forces (IDF) Major General Ghassan Alian, head of the Coordination of Government Activities in the Territories (COGAT), said: "Human animals must be treated as such. There will be no electricity and no water [in Gaza], there will only be destruction. You wanted hell, you will get hell".[7] These statements constituted a prima facie indication of intent to violate the prohibition of collective punishment under international humanitarian law. The subsequent blockade has had a devastating impact on the delivery of essential supplies, making it very difficult to provide effective humanitarian assistance.

Since then, obstacles to aid delivery imposed by Israel have been identified at nearly every stage of the supply chain required to bring goods into Gaza — even though under international humanitarian law, Israel — as the occupying power — has a legal obligation to facilitate the provision of humanitarian assistance.[8] This obligation was further reinforced by a ruling of the ICJ in January 2024, which dictated provisional measures that Israel must take to prevent acts of genocide in Gaza, including facilitating the provision of humanitarian assistance.[9]

Since 7 October 2023, the Gaza Strip has become a scene of near-apocalyptic horror. The most basic humanitarian needs — in a context of extreme urgency and suffering — have been subordinated to political and military considerations. While international humanitarian law and customary practices allow some scope for such prioritisation, the interpretation of key principles — such as proportionality, precaution, necessity and the distinction between civilians and combatants — has been pushed to an extreme that has severely undermined the protection of civilians, including humanitarian staff.

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5 OCHA, "Reported impact snapshot: Gaza Strip (7 May 2025)", 7 May 2025, https://www.ochaopt.org/content/reported-impact-snapshot-gaza-strip-7-may-2025

6 Emanuel Fabian, "Defense minister announces 'complete siege' of Gaza: No power, food or fuel", *The Times of Israel*, 9 October 2023, https://www.timesofisrael.com/liveblog_entry/defense-minister-announces-complete-siege-of-gaza-no-power-food-or-fuel/; video by Euronews available at No Comment TV, "'We are fighting human animals' said Israeli Defence Minister Yoav Gallant", YouTube, 10 October 2023, https://www.youtube.com/watch?v=ZbPdR3E4hCk

7 Gianluca Pacchiani, "COGAT chief addresses Gazans: 'You wanted hell, you will get hell'", *The Times of Israel*, 10 October 2023, https://www.timesofisrael.com/liveblog_entry/cogat-chief-addresses-gazans-you-wanted-hell-you-will-get-hell/

8 "Rule 55. Access for humanitarian relief to civilians in need", in *International Committee of the Red Cross, International Humanitarian Law Databases: Customary IHL*, https://ihl-databases.icrc.org/en/customary-ihl/v1/rule55, accessed 10 April 2025.

9 International Court of Justice, "Order of 26 January 2024", document number 192-20240126-ORD-01-00-EN, 26 January 2024, https://www.icj-cij.org/node/203447

As a result the civilian death toll has risen inexorably, while the fundamental needs of the 2.1 million people crammed into just 365 square kilometres have gone largely unmet. Humanitarian efforts have generally achieved only very limited success in alleviating their immense suffering.[10] According to an OCHA summary published on 7 May 2025, 91% of the population[11] had been projected to face crisis, emergency or catastrophic levels of acute food insecurity over the preceding six months, and over 92% of children aged 6–23 months, and pregnant and breastfeeding women, were not meeting their nutrient requirements due to lack of a minimum level of dietary diversity. On 27 April only 22 out 36 hospitals remained partially functional and as of 15 April over 1,400 health workers had been killed, some of whom were also included in the total of 418 aid workers killed.[12]

The health system has effectively collapsed, leaving it completely incapable of meeting the population's needs. People with chronic illnesses and those injured in attacks struggle to survive. Pregnant women with complications are forced to give birth in extremely harsh conditions, with minimal means of keeping their newborn infants alive. The dire conditions also create fertile ground for the spread of infectious diseases.

The prevailing lack of security in the Gaza Strip included systematic violations of the most basic standards for the protection of medical and humanitarian missions. MSF experienced this disregard at first hand: nine of our staff members were killed before the January ceasefire and many others faced constant, life-threatening danger.[13] Our teams were forced to evacuate healthcare facilities at least 14 times, and daily activities were carried out under the persistent awareness that a fatal incident could occur at any moment.

Working conditions were very harsh for MSF international staff, with some reporting going up to 25 days without meaningful rest — not only due to the intensity and duration of the work, but also because sleep was barely possible with the constant sound of bombing and the unceasing presence of drones overhead. However, the situation faced by local staff was simply unimaginable. The vast majority lost one, several, or many relatives or intimates. Most lost their houses, and endured harsh winters with no access to adequate alternative housing; more than half lived in tents for over a year. Unlike their international colleagues, local staff had no possibility of leaving Gaza to rest or recover. Many received multiple evacuation orders — some

10 According to COGAT, from 7 October 2023 to 18 January 2025, 1,325,977 tonnes of aid entered the Gaza Strip in 66,474 trucks and 10,450 pallets: 1,308,882 tonnes via land crossings (65,749 trucks), 7,385 tonnes via airdrops (10,450 pallets) and 9,710 tonnes via the maritime route (725 trucks). 77.84% of all aid was food, 8.07% shelter equipment and 4.09% water. Medical supplies accounted for less than 2.3%, or 30,430 tonnes. COGAT, "Gaza Humanitarian Aid Data", https://gaza-aid-data.gov.il/main/#AidData, accessed 9 April 2025.

11 Based on analysis of 1.95 million out of the total population of 2.1 million.

12 OCHA, "Reported impact snapshot: Gaza Strip (7 May 2025)", 7 May 2025, https://www.ochaopt.org/content/reported-impact-snapshot-gaza-strip-7-may-2025

13 Another three colleagues were killed in March, April and July 2025. MSF, "Remembering our colleagues killed in Gaza", updated 4 July 2025, https://www.msf.org/remembering-our-colleagues-killed-gaza

as many as 10. Each of these displacements involved moving with only what they could carry. Bombings also occurred without prior evacuation orders, creating a persistent sense of insecurity.

Scarcity is often linked to increased opportunities for organised crime, and in Gaza theft of supplies has been reported to have been carried out not only by individuals but more significantly by organised armed groups. Reports indicate that humanitarian supplies have been stolen by such groups who have allegedly benefited from the indifference — or even the tacit support — of Israel.[14]

Widespread indiscriminate killings and the destruction of homes, healthcare facilities, food systems and basic infrastructure; the severe restrictions on aid delivery imposed by Israel; and the theft of supplies in the Gaza Strip have made meaningful humanitarian intervention increasingly difficult. MSF has repeatedly raised concerns about these issues through press releases, interviews, testimonies, project updates, op-eds, statements, and two detailed reports: *Gaza: Life in a death trap* (December 2024) and *Gaza's silent killings: The destruction of the healthcare system in Rafah* (April 2024).[15]

This report aims to highlight the challenges faced by MSF teams in bringing in and distributing timely emergency aid supplies in response to the extreme humanitarian needs in the Gaza Strip that developed after 7 October 2023. It covers the period from 7 October 2023 to 19 January 2025 — the date when the second ceasefire came into effect.[16] Although written in the past tense, much of the content remains relevant to the present situation and could be expressed in the present tense. The report draws on data collected by MSF, as well as the testimonies and first-hand experience of 20 MSF staff members, mainly from supply teams, who were interviewed specially for the report.

14 See section III.5 for details and references.

15 All these public communications, approximately 180 until April 2025, can be consulted on the MSF website at https://www.msf.org/gaza-israel-war

16 However, the date of 31 January 2025 has sometimes been used to facilitate data processing.

II. Overview: MSF's shipment of humanitarian supplies into the Gaza Strip since 7 October 2023

II.i. MSF'S OPERATIONS AND SUPPLY EFFORTS IN GAZA

MSF has been working in the occupied Palestinian territory since 1989. Before 7 October 2023 MSF worked in three hospitals and several outpatient clinics in the Gaza Strip, providing comprehensive care for patients suffering from burns and trauma. Services included surgery, physiotherapy, psychological support, occupational therapy and health education. MSF also supported laboratories in identifying and treating antibiotic-resistant infections, and offered training and psychological support to local healthcare workers. Since 2018, MSF had been running a reconstructive surgery programme in northern Gaza. In 2022 MSF spent €20.1 million and employed a total of 367 staff (full-time equivalent) in the West Bank and the Gaza Strip. That year, MSF teams conducted approximately 137,000 outpatient consultations and 2,870 surgical interventions across the occupied Palestinian territory.

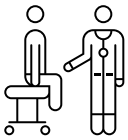
Sustaining these programmes required considerable effort, especially in navigating the challenges of bringing medical supplies and international staff into a region under tight restrictions and in particular subject to the land, sea and air blockade imposed by Israel in 2007. Many essential medical supplies were either scarce or entirely unavailable because of restrictions on importation. MSF was thus already experienced at coping with the significant logistical and administrative barriers (e.g. the inability to import X-ray machines) that existed prior to 7 October 2023. Over the years, MSF had developed procedures to facilitate the entry of goods and personnel into Gaza and maintained a working relationship with COGAT, the Israeli military authority responsible for overseeing humanitarian access to the occupied Palestinian territory.

After 7 October 2023 the humanitarian needs in the Gaza Strip surged dramatically, as did MSF's operational and economic commitments. From that date, MSF provided critical humanitarian medical care in Gaza, albeit inadequate to meet the medical needs and at a level much lower than its potential capacity, due to the constraints detailed later in this report. During the period from 7 October 2023 to 31 January 2025, shortly after the second ceasefire came into force, MSF teams carried out 549,000 outpatient consultations, 124,300 emergency room consultations, 34,300 individual mental health sessions, 34,200 patient admissions and 11,700 surgeries, and assisted 8,900 births. By the end of this period, MSF was supporting two hospitals and operating two field hospital in southern Gaza. Additionally,

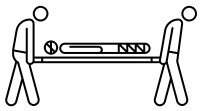
MSF was managing eight primary health centres — seven in the south and one in the north — and was actively assessing opportunities to expand activities in northern Gaza. On a daily basis, MSF was distributing 624,000 litres of desalinated water, ensuring access to clean drinking water for approximately 25,000 people. Sanitation efforts during the period included the construction of latrines serving 30,000 people across six camps, alongside a strategy to install a large-scale desalination station and 2,150 SATO toilets.[17]

17 This strategy could not be implemented by the end of the period of analysis, and so it continues as of June 2025 because Israel authorities have not still authorised these products, which they consider as "dual-use". SATO toilet (or SaTo – for "Safe Toilet") is a fitting that upgrades a pit latrine into a sealed, flushable toilet.

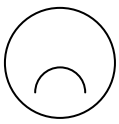
Figure 1
Between 7 October 2023 and 31 January 2025, MSF teams in Gaza provided



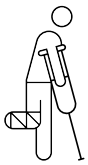
549,000
Outpatient consultations



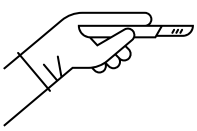
124,300
Emergency room consultations



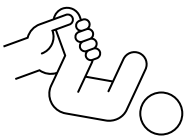
34,300
Individual mental health sessions



34,200
Patient admissions



11,700
Surgeries



8,900
Births assisted

Nevertheless, the organisation was able to implement its intended operations only in part, because it was unable to bring into the Gaza Strip the full component of supplies needed to respond to the overwhelming demand. During this period, MSF managed to deliver nearly a thousand tonnes of supplies into the Gaza Strip, along with hundreds of international staff members, who joined the efforts of an even larger number of local Palestinian colleagues. These figures demonstrate that access was not entirely blocked. But many of these supplies arrived too late, and much more never arrived at all. With more supplies, MSF could have done significantly more.

The quality of care provided could also have been significantly improved under better supply conditions. Due to severe shortages, MSF teams were forced to stop the distribution of nappies to children with diarrhoea admitted to its malnutrition centres. For several months, they were unable to provide hygiene kits to postpartum mothers, lacking essential items such as sanitary pads, soap and other basic products. In the absence of necessary equipment, they had to resort to manufacturing items such as wheelchairs, medication carts, beds and incubator covers locally, using inadequate materials. Essential therapeutic feeding supplies for malnourished mothers failed to arrive, many of whom were unable to breastfeed due to insufficient milk production. As a result, malnutrition was passed on to their infants, who likewise could not be given therapeutic infant food, which had also failed to reach the facilities. Kits containing blankets, tents and thermal clothing, intended to help the population endure a harsh and rainy winter, were delivered six months late, in the spring, when they were no longer needed. Critical materials for water treatment never arrived at all. And medical procedures requiring highly specific equipment medicines and other products were at times carried out under conditions that would be considered shocking by any medical professional: from treating large numbers of crush injuries and burns with extremely limited supplies to amputating limbs without anaesthesia.

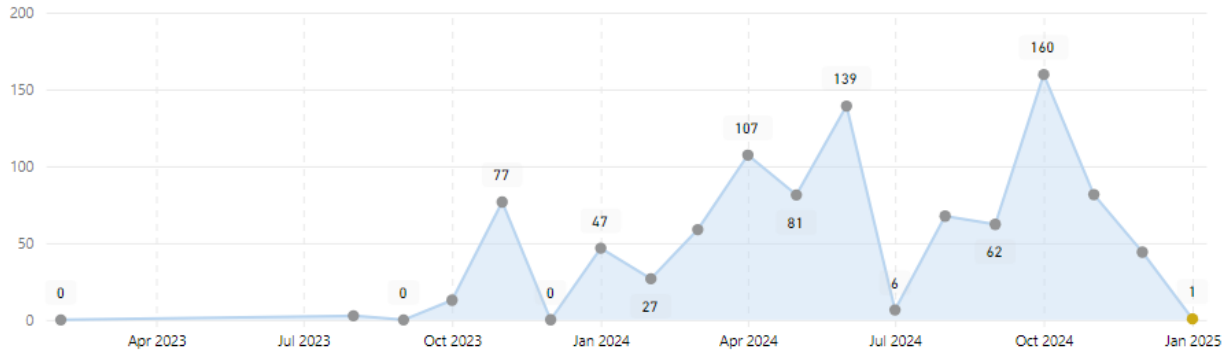
The following graphs provide an overview of.

Figures 2, 3 and 4

MSF's supply efforts in Gaza until 19 January 2025, including data on weight, volume and the cost of the goods (excluding any associated supply or delivery charges)

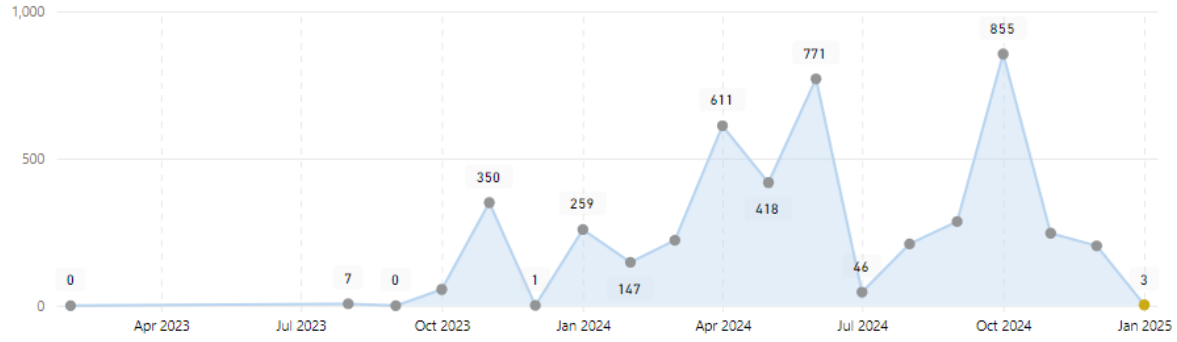
WEIGHT:

974,3 Tonnes → **72%** Medical | **27%** Logistical | **55%** Air transported | **32%** Sea transported



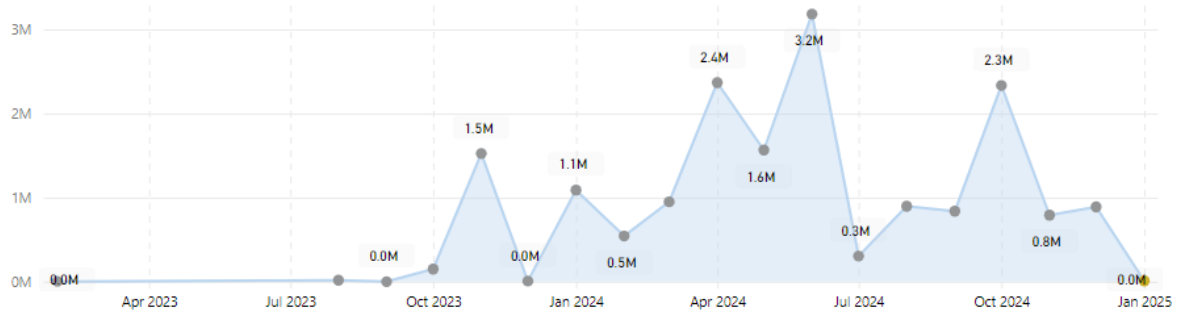
VOLUME:

4,700 m³ → **68%** Medical | **31%** Logistical | **54%** Air transported | **31%** Sea transported



COSTS:

€ 17.5 m (for international supplies only) → **75%** Medical | **25%** Logistical | **63%** Air transported | **27%** Sea transported



II.ii. THE CORRIDORS

Before 7 October 2023 all humanitarian supplies and personnel entering the Gaza Strip were routed through Israel. Since then, the mechanisms for delivering aid to the Strip have become highly volatile, marked by frequent openings and closures of crossing points, and constant changes in conditions and procedures. The routes used can be categorised into three so-called "corridors", via Israel, Egypt and Jordan — each with its own specific restrictions, limitations, and particularities.[18] MSF has utilised all three corridors in a coordinated strategy that has proven effective in adapting to significant changes, evolving restrictions and various risks. However, this approach has been time-consuming, requiring considerable effort and resources. It has involved managing three distinct logistical structures instead of one, increasing costs, complexity and staffing needs. This has heavily impacted MSF's supply centres, which have had to adjust to shifting circumstances by rerouting cargo, modifying documentation, repalletising (unpacking and reassembling shipments according to different specifications, which has become a major source of delay), and dealing with the uncertain and often arbitrary nature of the Israeli authorities' decisions and stipulations. Additionally, maintaining high levels of technical expertise during constant staff turnover has been a persistent challenge.

From 7 October 2023 to 19 January 2025 (the start of the second ceasefire), the Egyptian corridor became MSF's primary route for large international shipments into the Gaza Strip. However, the safer Jordanian corridor was preferred for sensitive equipment, where theft or damage would have severe consequences.[19] When goods were procured locally, procurement within Israel and the occupied Palestinian territory was preferred to procurement in Egypt or Jordan, because the Egyptian corridor, initially the primary choice in the aftermath of the 7 October attacks, became increasingly difficult to use due to congestion at the Kerem Shalom/Karem Abu Salem[20] crossing. Meanwhile, local purchasing in and transportation from Jordan involved significant bureaucracy and delays in Jordan and Israel.

The following descriptions aim to illustrate the procedures and limitations associated with each corridor. The procedures in force have been subject to change, meaning that not all details in the descriptions have been applicable across the whole territory covered by the corridor in question at all times. Nevertheless, the following outlines are representative of typical conditions in each corridor during the period of analysis.

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18 Other corridors existed during the period of analysis, but they were not used by MSF for any of its supplies. They included the floating dock or Joint Logistics Over-the-Shore (JLOTS, the US-built pier that closed on 18 July 2024), humanitarian airdrops, and the Cyprus Maritime Corridor.

19 The Jordanian corridor significantly reduced risk by avoiding the smuggling (which led to more exhaustive inspections) and theft from non-MSF warehouses that were issues in the Egyptian corridor; in Jordan, goods were stored in MSF premises. Furthermore, the conditions for unloading and transfer, as well as the scanners used at Kerem Shalom (in a different area) were preferable to those in the Egyptian corridor.

20 Karem Abu Salem is the name in Arabic.

The Egyptian corridor

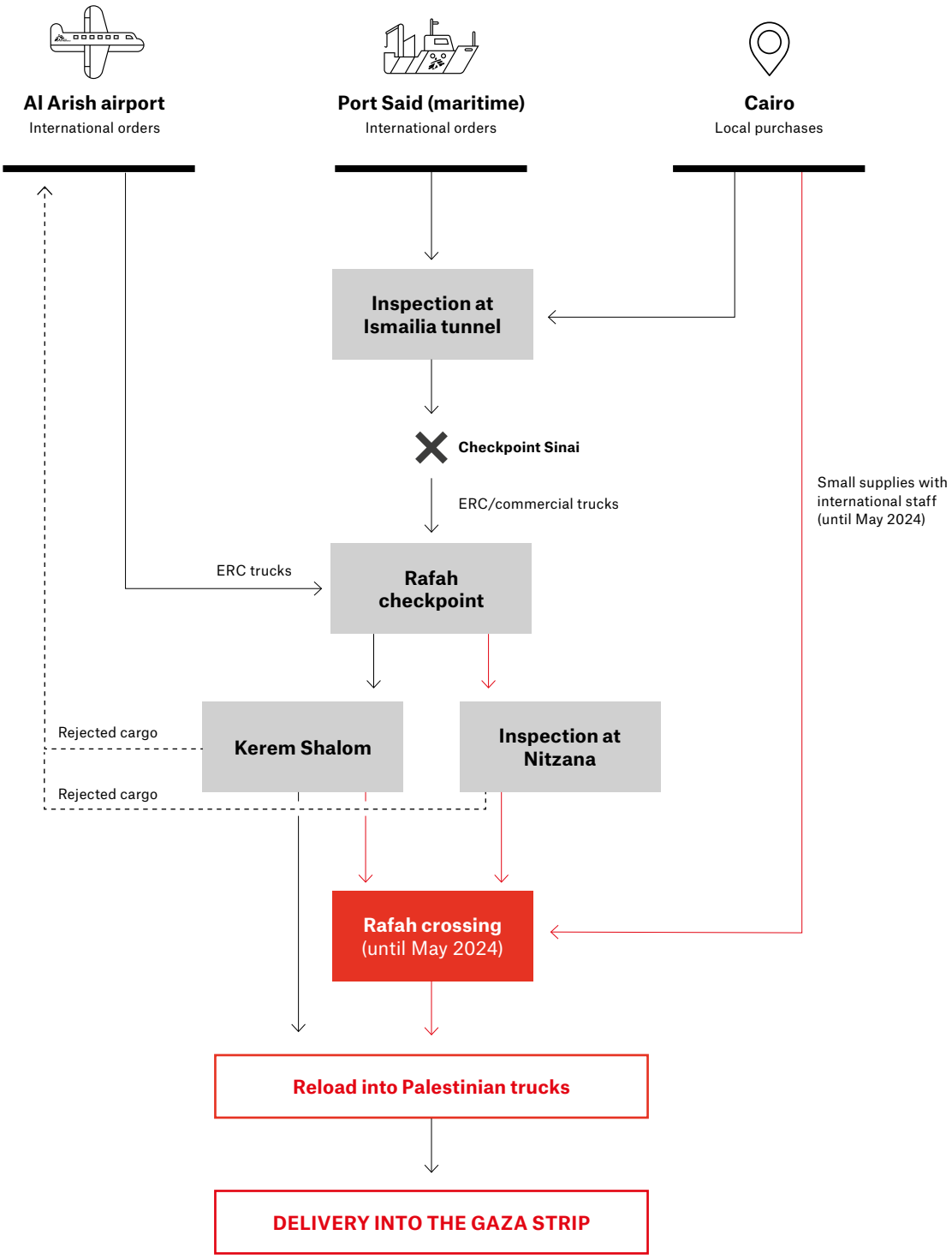
After 7 October 2023, all borders connecting the Gaza Strip with Israel were completely closed, leaving the Rafah border crossing as the sole entry point for supplies.[21] In response, the Egyptian authorities implemented a centralised procedure for the delivery of humanitarian aid, which reportedly included the following measures:

- **Managing the influx of airborne and maritime shipments.** To prevent commercial airports (particularly Cairo International Airport) from being swamped by traffic, all humanitarian supplies arriving by air were required to be routed to El Arish international airport. Located approximately 350 kilometres east of Cairo and about 50 kilometres from the Gaza border, El Arish is the closest international airport to the Rafah crossing. However, the lack of scheduled commercial flights serving El Arish meant that humanitarian organisations had to charter entire flights, incurring significant economic costs. For maritime shipment, the selected port for container delivery was Port Said, by the Suez Canal, located around 200 kilometres northeast of Cairo and 200 kilometres from the Gaza border. Under a 2023 agreement between Israel and Egypt, all chartered flights arriving at El Arish airport had to be processed by the WHO, which was responsible for requesting landing permits and receiving all imported cargo under its name, thereby becoming the official owner of the supplies.

- **Defining the role of the Egyptian Red Crescent (ERC)**. The Egyptian government mandated the ERC to handle all cargo received via air (at El Arish airport), sea (at Port Said) or land (from local procurement in Cairo), and established large-scale warehouses near the border to manage incoming aid. The ERC played a central role in the logistics process, which involved checking each truckload, repackaging, sorting and transporting the aid for screening.

21 The first humanitarian trucks into the Gaza Strip were not allowed until 21 October, after two weeks of a total cessation of supplies.

Figure 5
Procedure for supply in the Egyptian corridor



Red-coloured arrows indicate flows until May 2024.

- **Transportation to Egypt.** Before each charter flight could be dispatched, humanitarian INGOs were required to obtain landing permits, a process that for MSF averaged four weeks. The documentation had to be presented in a specific format to facilitate approval. The WHO had a limited capacity to handle the international cargo of each INGO. For MSF, the limit was one charter flight per month with a maximum 150m^3 for the entire MSF Movement. Maritime shipments became a viable option for INGOs only several months after October 2023, via Port Said. However, these shipments involved significant delays, in MSF's case typically taking six to seven weeks to arrive.[22]

- **Arrival, clearance and reloading.** Humanitarian supplies arriving to either El Arish airport or Port Said were loaded onto trucks and taken to ERC warehouses, where they were inspected by Egyptian authorities before being reloaded onto trucks for onward transit to the Gaza border crossing. The Egyptian authorities had implemented an emergency pre-clearance process for the transit of international cargos, both medical and logistical. This process enabled a relative swift customs clearance time — around one week for sea cargo and two days for air cargo, based on MSF's experience. However, the entirety of this first stage typically took between five and ten days.

- **Inspection at Ismailia tunnel.** This tunnel, which runs underneath the Suez Canal, is located about 125 kilometres from Cairo and around 78 kilometres from Port Said and trucks from both locations had to pass through it en route to Gaza. Trucks carrying food and medical supplies were given priority. Additionally, trucks that were fully loaded were prioritised over those that were partially loaded.

- **Inspection and manifesting.** Trucks had to wait in long queues between El Arish and the Rafah crossing before being manifested — that is, added to the official list of trucks authorised to cross into Gaza.[23] Queues were often a kilometre long and composed of 2,000–3,000 trucks, according to MSF visual estimates. In December 2023 and January 2024, there were instances of over 5,000 trucks waiting. With a scanning capacity at the border inspection of just 200–300 trucks per day, and sometimes only 100 trucks being accepted daily, the waiting time could extend for weeks. Although in theory the system operated on a first-in, first-out basis, in practice, priority was given to food and medical supplies. Closures due to military operations, settler protests or other factors could increase waiting times, but even with prioritisation of food and medical supplies, long delays in extreme weather conditions — such as scorching heat during the day and freezing temperatures overnight — could lead to quality degradation,

22 Including the time needed to secure container availability on ships bound for Port Said, as well as the transit time.

23 Manifesting procedures were conducted online in Cairo, as MSF team was not permitted to operate in El Arish.

including disruptions of the cold chain and spoilage of medicines due to inappropriate temperatures. Vehicles used included both enclosed and flat-bed trucks; however, the use of refrigerated trucks — capable of maintaining controlled temperatures, such as between 15 °C and 25 °C — was not permitted for an extended period. The entire manifesting process was managed by the ERC. In addition to the prioritisation of food and medical supplies, another prioritisation component was introduced through the Inter-Cluster Coordination Group,[24] which provided approximately weekly updates on the percentage of aid permitted to enter the Strip by type — such as food, medical, logistical, water and sanitation, and other supplies. Additionally, the ability to exert influence played a significant role: certain carriers and drivers appeared able to reduce their waiting times, suggesting informal channels or preferential treatment could be at play.[25]

- **Three-stage inspection by Israeli authorities at Nitzana or Kerem Shalom.** In theory, all supplies into Gaza via Rafah crossing point had to be inspected at Nitzana, located on the Egypt–Israel border about 46 kilometres south of that crossing point. However, occasionally (e.g. when sending cold chain but sometimes also for no specified reason) MSF supplies were scanned at Kerem Shalom when passing by Rafah crossing point. After the closure of this crossing point in May 2024 the only inspection point used was Kerem Shalom. At Nitzana and Kerem Shalom a three-stage inspection process was conducted. First, there was a visual inspection of all cargo. Next, a general scan of the entire truck was conducted, followed by a pallet scan. For this final step, the supplies were unpacked, loaded onto special pallets to fit the scanner, and scanned again. The offloading process took place in an overcrowded area where the pallets could be exposed to the sun or rain for several days. With over 12,000 pallets in the area at any one time, finding specific items could be difficult. If a single item was rejected, the Israeli authorities sent back the entire shipment to El Arish, where the lengthy process started again.

- **Unloading and reloading areas.** At Nitzana, once the supplies were approved by the Israeli authorities, they were reloaded in the same trucks and driven to the Gaza crossing point, where they had to be unloaded again. In both this crossing point and at Kerem Shalom (where the supplies using this crossing point were also unloaded for inspection) the supplies had to be reloaded onto Palestinian trucks for entry into Gaza. This was frequently a chaotic process as there were often not enough forklifts for the enormous quantity of pallets. Unloading procedures followed a first-in,

24 The OCHA-chaired Inter-Cluster Coordination Group is the central platform for coordinating across multiple humanitarian sectors during emergencies, ensuring that different clusters – sectors like Health, WASH (water, sanitation and hygiene), Shelter, Protection, Logistics, Nutrition, and others – work together efficiently. See OCHA, "Coordination structure", https://www.ochaopt.org/coordination/coordination-structure

25 Even though truck drivers were typically compensated for each day spent waiting, the pay was considerably lower than they earned when actively transporting goods. As a result, many drivers were eager to minimise their time in the queue, further incentivising efforts to bypass the standard process.

first-out system, meaning that if the correct Palestinian trucks (i.e. the ones that had been assigned to collect the first consignments in the queue) were not already on site for transfer, the entire process was delayed until they arrived. MSF occasionally experienced such delays.

On average, it took four to five weeks for a shipment to move from Egyptian territory to Gaza, with some shipments taking as long as 10 weeks.

According to authorities, smuggling was a frequent concern, necessitating extensive searches by the ERC and Egyptian and Israeli authorities. These searches often involved opening pallets and boxes, sometimes resulting in the pallets being damaged or their contents rearranged to the point that they would not fit into the scanner. In such cases, Israeli authorities could reject the entire cargo rather than just the damaged pallet, causing the process to restart from the beginning, meaning that the trucks had to reload the damaged cargo and return to the ERC warehouse for the cargo to be inspected repacked. This issue was not encountered with shipments through the other corridors (Israeli and Jordanian).

The Egyptian corridor offered strong local procurement capacity and diverse supplier options. However, because MSF was registered in Egypt not as a medical organisation but rather as a humanitarian organisation, it was not allowed to purchase or store medicines and other medical supplies within Egypt. Consequently, MSF had to rely on international cargo shipments and the cold chain capacity managed by the ERC and WHO to deliver medical supplies into Gaza via the Egyptian corridor. From the moment the items were packaged at MSF logistics centres in Europe until they finally arrived at the project sites, MSF was unable to open and inspect such cargos.

The Jordanian corridor

From February 2024, a wide-scale IDF offensive in Rafah appeared increasingly imminent. This offensive eventually started on 6 May. The prospect of an offensive raised the need to find an alternative supply route in case the Rafah border was closed, which in fact happened immediately after the offensive began. The alternative route emerged in the form of a road convoy facilitated by the Jordan Hashemite Charity Organisation (JHCO),[26] using military trucks (including vehicles of the US army) to transport goods across Israel directly to northern Gaza (despite MSF also used its own non-militarised trucks).
A second option developed in the form of UN convoys to southern Gaza, but MSF never used these as they required all cargo be formally imported into Jordan and cleared in advance — instead, MSF supplies entered Jordan in the form of transit cargo not requiring Jordanian import procedures.

26 The JHCO is "a multifaceted national non-governmental, non-profit organization that seeks to prompt and take part in voluntary charitable activities both in Jordan and abroad". JHCO, "About JHCO", https://jhco.org.jo/about-jhco?mnuId=1419, accessed 9 April 2025.

Supplies from Jordan had already begun prior to Rafah being closed. On 30 April 2024, the "first" reported convoy of humanitarian supplies through an Israel-authorised corridor connecting Jordan to Gaza (via the Erez crossing point) was scheduled to leave Jordan under the supervision of US Secretary of State Anthony Blinken, whose government had reportedly exerted pressure on Israel to reopen the Erez crossing. This shipment was expected to "feed 100 to 150 families for around a week — a drop in the bucket", according to a Jordanian official.[27] However, the transportation of aid from Jordan to Gaza had already been occurring prior to April 2024. On 20 December 2023, the first direct aid convoy from Jordan since 7 October reached Gaza. This convoy, organised jointly by the JHCO and the World Food Programme (WFP), went through Kerem Shalom.[28]

The procedure for sending humanitarian supplies from Jordan to Gaza appeared to function efficiently. All cargo was secured in Jordan and inspected by US military teams and later by Israel at the Allenby Bridge (King Hussein) crossing. Once cleared, the cargo was transported directly into Gaza without being opened or re-inspected at Kerem Shalom, and without requiring further validation from COGAT. However, in October 2024 Israel abruptly suspended this system for approximately one month. The halt came without prior notice and significantly impacted operations. MSF had several hundred tonnes of supplies stuck in Amman, including essential drugs approaching their expiration dates.

In November 2024, humanitarian actors were instructed to shift to a new system based on the UN2720 mechanism,[29] still under the aegis of the JHCO. Organisations were required to register and follow set procedures, which entailed a substantial administrative workload. The process involved entering detailed information about the contents of each shipment into an online application system, often including photographs of individual items. COGAT introduced an approval process under this new system. While it was somewhat faster than previous bureaucratic procedures, it remained slower and more cumbersome than the earlier clearance system.

The UN2720 mechanism functioned as shown in the flow chart below.

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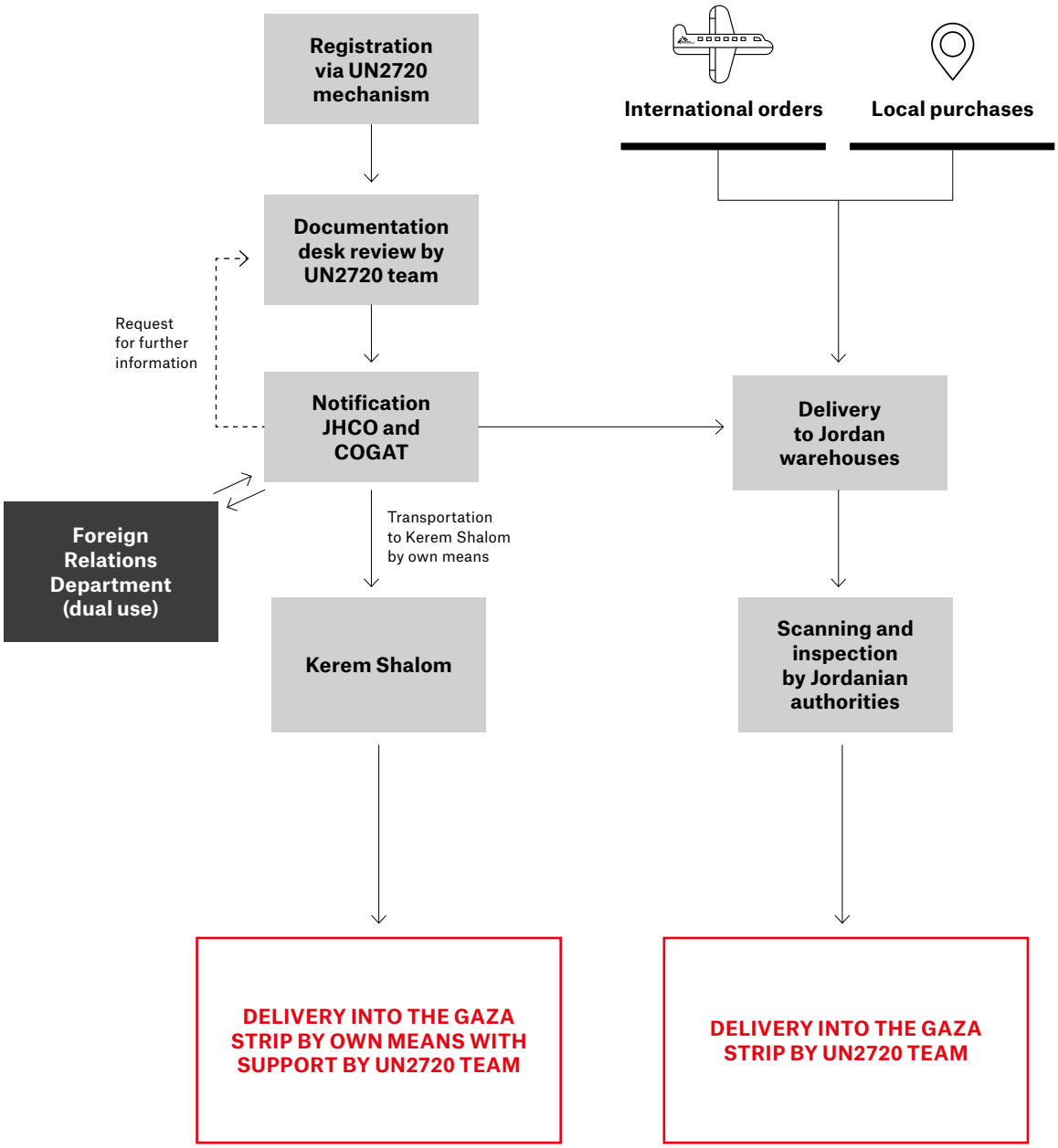
27 *Al Arabiya English*, "Blinken oversees Jordanian aid convoy to Gaza through newly opened crossing", 30 April 2024, https://english.alarabiya.net/News/middle-east/2024/04/30/blinken-oversees-jordanian-aid-convoy-to-gaza-through-newly-opened-crossing

28 WFP, "WFP delivers first aid convoy from Jordan to Gaza", 20 December 2023, https://www.wfp.org/news/wfp-delivers-first-aid-convoy-jordan-gaza

29 "In accordance with Security Council Resolution 2720 (2023), the Senior Humanitarian and Reconstruction Coordinator for Gaza (SHRC) is responsible for facilitating, coordinating, monitoring and verifying the delivery of humanitarian assistance to Gaza". UN, "Update on the UN 2720 mechanism – UN Senior Humanitarian and Reconstruction Coordinator for Gaza (as of 26 June 2024)", 4 July 2024, https://www.un.org/unispal/document/update-on-the-un-2720-mechanism-04jul24/

Figure 6
Procedure for supply in the Jordanian corridor



On 19 January 2025, the JHCO reported that between 7 October 2023 and that date it had sent to Gaza 141 convoys involving 5,127 trucks carrying humanitarian supplies to Gaza, in cooperation with the Jordan Armed Forces.[30]

The Jordanian corridor presented both advantages and disadvantages compared with the other supply routes. One significant advantage was that trucks accessing Kerem Shalom via this corridor used a different route from those coming from Egypt. As a result, there were far fewer trucks waiting in the Jordanian corridor, and cargo unloading was much better organised and more efficient than in the Egyptian corridor. Additionally, in the Jordanian corridor cargo underwent scanning on a separate platform with fewer trucks to process, making it less congested. MSF and other humanitarian organisations could often access the goods on the day they were submitted for inspection. In contrast, the Egyptian corridor typically involved more onerous inspections and longer waiting times. Moreover, when using the Jordanian and Israeli corridors MSF rarely suffered missing items, pallets were not damaged and trucks were seldom refused entry.

The Jordanian corridor was particularly advantageous for MSF. This was due to the fact that its logistics hub in Dubai is directly linked to Jordan by road. As of late January 2025, this corridor allowed MSF to supply both northern and southern Gaza — prior to the ceasefire, only the southern part of Gaza was accessible from Egypt, and crossing from the south to the north was not possible. Following the January 2025 ceasefire, and thus after the end of the period considered in this report, a fast-track customs procedure using the UN2720 mechanism was authorised.[31]

However, there were notable disadvantages to the Jordanian corridor. During months the clearance processes were unclear in both Israel and Jordan and MSF engaged with those processes in both countries. Imports procedures during that time took around 7-10 days in Jordan and 1-3 months in Israel (occasionally longer). Later, Jordan allowed items in cargos in transit (avoiding import procedures) using the JHCO system. But while food and basic relief items could be transported in transit in Israel, the Israeli authorities strictly prohibited medical goods in transit through this route. This forced MSF to engage in formal import procedures in Israel. Moreover, the corridor involved a complex set of procedures and documentation and checks at border crossings. Cargo had to be offloaded at the Jordan-Israel border and reloaded onto another truck, adding an extra step to the process.

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30 *The Jordan Times*, "Jordan delivers 141 aid convoys to Gaza since outbreak of war - JHCO", 19 January 2025, https://jordantimes.com/news/local/jordan-delivers-141-aid-convoys-gaza-outbreak-war-jhco

31 This followed an agreement with COGAT to fast-track shipments from Jordan. As a result, in late January MSF was able to move trucks that had been blocked at the border for two to three months. Previously it had been necessary to provide, for each item, the catalogue number, illustration, technical data sheet, and the GPS coordinates of the location where the item was to be used. After the agreement, a general waiver sufficed and the customs process became much faster: four to five days instead of the two to three months that had previously been usual.

There was also a risk of cold chain disruption. While MSF could replace icepacks in Amman before departure, transit times through the corridor were unpredictable. While delays of two or three days did not pose a problem, longer delays risked compromising the cold chain and spoiling temperature-sensitive supplies.

Lastly, although the Jordanian corridor allowed local procurement in Jordan, the process involved was significantly more complex and time-consuming compared with local purchasing in Jerusalem.

The Israeli corridor

Prior to 7 October 2023, most humanitarian personnel and supplies entered the Gaza Strip via Israel. After that date, alternative corridors became more important, although they remained dependent on Israeli authorisation. The Israeli corridor was used by both internationally imported goods — primary entering Israel via the port of Ashdod — and goods locally purchased in Jerusalem.[32]

This corridor presented a mix of advantages and limitations. The most significant drawback was the extremely lengthy customs clearance process in Israel. Clearance for humanitarian cargo involved a complex and time-consuming documentation process and could take between one and three months, even during periods of ceasefire, which was highly detrimental to emergency response operations. This delay was one of the main reasons why MSF preferred to use other corridors with expedited emergency clearance procedures (in Egypt) or not requiring import procedures (in Jordan).

Storage limitations also posed a challenge. MSF lacked a dedicated transit warehouse for international cargo, which forced the organisation to coordinate shipments tightly with COGAT approvals to avoid delays or storage charges in the Israel-administrated transit zone at the port of entry. Furthermore, MSF did not have an official medical warehouse or registered pharmacy in Israel, and therefore could not maintain an emergency stockpile.

The main advantages to the Israeli corridor were the strong capacity for local purchases of both logistical and medical items, including controlled substances such as narcotics — though these took longer to purchase than other products. Although the COGAT clearance sometimes delayed shipments, once clearance was granted goods could be shipped into Gaza relatively quickly. Unlike in the Egyptian corridor, items were not subjected to rough handling or damage due to excessive searches. Moreover, humanitarian cargo entering Gaza through the Israeli corridor used a different entry lane at

32 By including Jerusalem in the Israeli corridor, by no means does this report intend to take a position on the disputed status of the city, regardless of where in the city local purchases were made. The "Israeli" character of the corridor refers only to the transit land route and administrative authority.

Kerem Shalom to that used by Egyptian trucks. This lane typically had fewer trucks — sometimes as few as five — waiting, with significantly reduced waiting times and minimal inspections. This resulted in much faster entry into Gaza. In this corridor, as it was the case in the Jordanian corridor but not in the Egyptian one, MSF was able to directly supervise procedures related to customs clearance, transportation and cold chain logistics. The Israeli corridor also offered access to northern Gaza at some times.

II.iii. CROSSING POINTS INTO THE GAZA STRIP

After 7 October 2023, the entry points into the Gaza Strip experienced frequent closures and reopenings, significantly impacting the flow of humanitarian aid. Each crossing had its own dynamics and limitations, and operational relevance for humanitarian supplies:

Disclaimer: The names and boundaries shown and the designations used in this map do not imply official endorsement or acceptance by MSF.

- **Rafah.** This was the primary entry for humanitarian supplies during the last quarter of 2023. However, its use declined progressively in favour of Kerem Shalom. It was permanently closed on 7 May 2024.

- **Kerem Shalom.** This became the main entry point for humanitarian supplies in January 2024, following its initial use in December 2023. The closure of Rafah significantly increased traffic at this crossing, leading to chronic congestion. At times, several thousand trucks were queuing, with prolonged waiting periods. During certain periods, such as summer 2024, Israeli authorities did not allow entry to enclosed trucks (with the exception of refrigerated trucks) and cargo had to be offloaded for scanning. Israeli authorities argued that open flatbed trucks enable easier access for pallet inspection and scanning. Problems reported by humanitarian staff, including MSF teams, on the Gaza side of Kerem Shalom, included organised crime, conflicting IDF instructions and arrests, detention and harassment of drivers. As a result, securing transportation within Gaza was often very difficult, with thousands of pallets left waiting for pickup and delivery to humanitarian warehouses.

- **Gate 96 and the Fence Road.** Direct entry at this crossing point was typically reserved for IDF and government-to-government shipments. Humanitarian organisations had only occasional and limited access, and prior scanning at Kerem Shalom was required. Gate 96 and Kerem Shalom were connected by the Fence Road, a heavily militarised and tightly restricted corridor running along the Israel–Gaza border. Israel limited the use of this route mainly to the WFP, which oversaw five 30-truck convoys per week as of August 2024, usually at night. Of the 30 trucks in each convoy, 20 were allocated to the WFP and five to the WHO, while the remaining five were for other organisations. The WHO often gave one of its five allocated trucks to MSF cargo. However, access through this route was subject to opaque and unpredictable decisions on the part of the Israeli authorities. This made it impossible to plan around a specific date when supplies were expected to reach their destinations.

- **Erez West/Zikim.** Israeli authorities frequently closed this crossing point and, when it was open, they allowed only a limited number of trucks to pass through. They first scanned all cargo at Kerem Shalom. Due to security issues and Israeli restrictions on movement coordination, transport from northern Gaza to the south was very limited, effectively rendering journeys from north to south nonviable for most humanitarian operations. MSF, with the majority of its operations located in southern Gaza, therefore made little use of this crossing. South-to-north movements were more feasible.

- **Erez/Beit Hanoun.** Israel kept this crossing point largely closed from 7 October 2023, with only brief openings (e.g. from 1 to 9 May 2024, and again in August and September 2024).

– **Kissufim.** Israel kept this crossing point generally closed, with only sporadic openings. Due to widespread theft and security issues in the area, the logistics cluster[33] chose not to use this route.

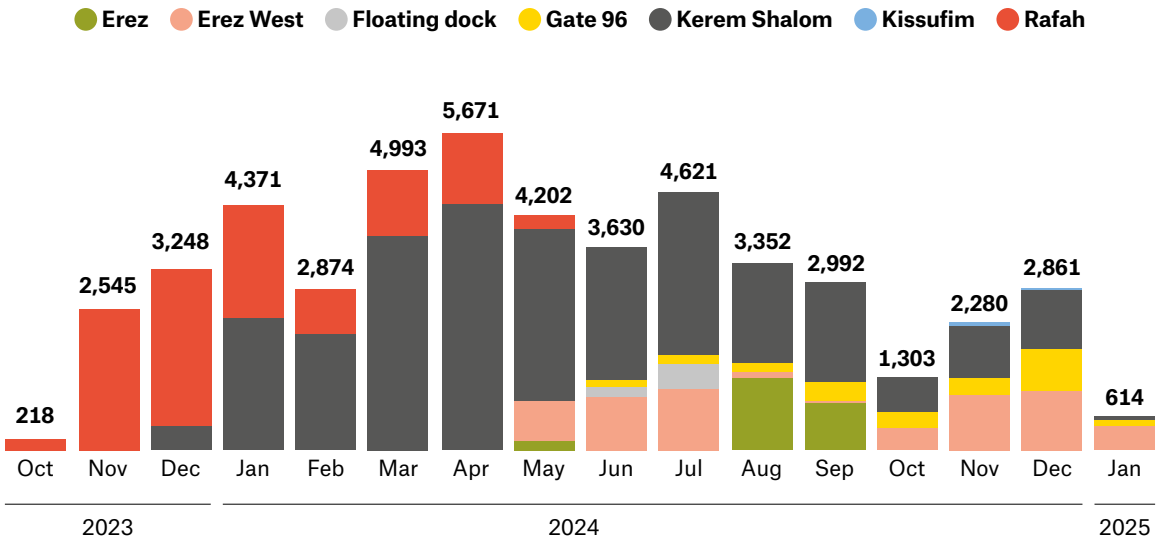
– **Floating dock or JLOTS (Joint Logistics Over-the-Shore)**. On 7 March 2024, US President Joe Biden announced plans for the US military to build a temporary pier on the coast of the Gaza Strip to help deliver humanitarian aid.[34] MSF US Executive Director Avril Benoît responded that it was a "glaring distraction from the real problem: Israel's indiscriminate and disproportionate military campaign and punishing siege". She concluded that "this is not a logistics problem, it's a political problem", and what was urgent was an immediate and sustained ceasefire and immediate humanitarian access using the roads and entry points that already existed, pointing out that medical supplies so desperately needed by people in Gaza were sitting just across the border, but were currently blocked.[35] MSF did not use JLOTS for any supplies. The US-built floating pier was operational during June and July 2024, but closed on 18 July 2024.

33 The Logistics Cluster is part of the Cluster system that was established by the Inter Agency Standing Committee. The WFP is the Logistics Cluster global lead agency. "Palestine. Logistics Cluster", https://www.logcluster.org/en/ops/pse23a

34 Joe Biden, "Remarks of President Joe Biden — State of the Union Address As Prepared for Delivery", *The White House*, 7 March 2024, https://bidenwhitehouse.archives.gov/briefing-room/speeches-remarks/2024/03/07/remarks-of-president-joe-biden-state-of-the-union-address-as-prepared-for-delivery-2/

35 Avril Benoît, post on MSF International X account, 8 March 2024, https://x.com/MSF/status/1766154382528102681?s=20

Figure 7
Number of truckloads crossing monthly and crossing points used, October 2023 to 19 January 2025



Source: https://www.ochaopt.org/data/crossings. Data: OCHA, UNRWA, WFP.

III. Major constraints on supply for effective humanitarian action

Delivering essential humanitarian and medical supplies to the Gaza Strip has long posed a significant challenge for humanitarian organisations, including MSF. After 7 October 2023, the obstacles multiplied, resulting in only a fraction of the required supplies arriving on time. This seriously undermined organisations' ability to conduct effective and high-quality humanitarian operations.

The entry process for supplies was extremely time-consuming and marked by arbitrary decisions at multiple levels. Israeli authorities argued that restrictions were necessary to prevent items from being diverted by Hamas for military purposes. However, on many occasions, MSF teams were unable to understand how the inconsistent and arbitrary measures imposed — ineffective from a humanitarian perspective — could serve this objective.

III.i. LIMITED CAPACITY TO RECEIVE INTERNATIONAL CARGO

In many other emergency situations, MSF and other international humanitarian organisations are permitted to land directly in armed conflict zones using chartered flights. This enables aid to be delivered much closer to the affected populations and, naturally, allows for much faster response times. This direct delivery option was difficult in the Gaza Strip, where the airport and seaports have been destroyed. However, Israel did not provide an efficient alternative for rapid delivery within the Strip, as required by international humanitarian law.[36]

In humanitarian supply chains, timing and foresight are critical. Items essential for high-quality humanitarian and medical care must arrive promptly at the project sites. However, in the case of Gaza, delays have long been a reality, and after 7 October 2023 certain stages of the international ordering process became even more prolonged. These extended delays resulted in vital supplies arriving late or not at all, severely compromising the quality and effectiveness of MSF's response.

36 Article 59, paragraph 1 of the Fourth Geneva Convention provides that "if the whole or part of the population of an occupied territory is inadequately supplied, the Occupying Power shall agree to relief schemes on behalf of the said population, and shall facilitate them by all means at its disposal." International Committee of the Red Cross, *International humanitarian law databases: IHL treaties: Geneva Conventions of 1949, additional protocols and their commentaries*, https://ihl-databases.icrc.org/en/ihl-treaties/gciv-1949/article-59.

The figure below presents a chronological overview of the international ordering process, which stands as a proxy for the supply process itself. It first shows a sequence of events that mark key stages and lead time segments in the process from stock-take to order reception. Each stage is associated with a date or time stamp (TS). The lead time (LT) refers to the time which elapses between two stages (e.g. formulation LT corresponds to the time between the stock take date and the creation of an order). The figure then compares the times taken for each stage in the contexts of orders for Gaza (treating all three corridors together) and orders for all MSF projects worldwide, both before and after the 7 October 2023 attacks, as follows:

- Line 1: Gaza from 7 October 2023 to 19 January 2025 (the date of the second ceasefire).
- Line 2: All MSF projects worldwide (including Gaza) during the same period.
- Line 3: Gaza from 1 January 2020 to 7 October 2023 (pre-crisis baseline).
- Line 4: All MSF projects worldwide (including Gaza) during the same period.

Figure 8
Standard measurement framework: time stamps and lead time segments

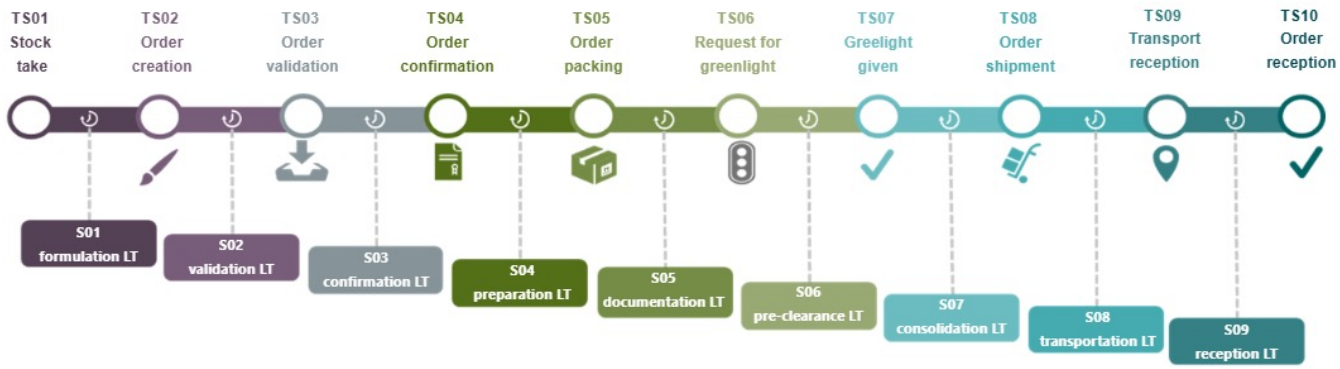


Figure 9
Average lead time per segment: number of days and percentage

	S01 Formulation	S02 Validation	S03 Confirmation	S04 Preparation	S05 Documentation	S06 Pre-clearance	S07 Consolidation	S08 Transportation	S09 Reception
Gaza after 7 October 2023: 185 days	13	2	5	25	25	27	28	27	33
	7%	**1%**	**3%**	**14%**	**14%**	**15%**	**15%**	**15%**	**18%**
All MSF projects after 7 October 2023: 184 days	23	9	10	45	14	18	16	31	18
	12%	**5%**	**5%**	**24%**	**8%**	**10%**	**9%**	**17%**	**10%**
Gaza before 7 October 2023: 275 days	52	5	9	33	25	78	21	29	23
	19%	**2%**	**3%**	**12%**	**9%**	**28%**	**8%**	**11%**	**8%**
All MSF projects before 7 October 2023: 205 days	22	6	9	46	20	19	19	37	27
	11%	**3%**	**4%**	**22%**	**10%**	**9%**	**9%**	**18%**	**13%**

Gaza was considered an emergency intervention for MSF, which means that all time segments under MSF's direct control were significantly shortened. However, three key stages in the supply process consistently took longer in Gaza than in MSF operations elsewhere: documentation, pre-clearance and consolidation. The table below describes each of the nine lead time segments, and for each segment lists MSF's performance (again averaged across the three corridors), and the factors affecting performance, in the context of supplying projects in Gaza after 7 October 2023.

Importing goods into Israel typically took MSF a considerable time, even during periods of ceasefire. Only custom clearance could take from one to three months and the actual importation had to be preceded by the completion of complex and time-consuming documentation. These extended lead times significantly hindered the timely delivery of humanitarian goods to the Gaza Strip, undermining the effectiveness of MSF emergency operations. This was one of the main reasons why the Israeli corridor was generally avoided for large-scale shipments.

Following 7 October 2023, Egypt implemented an emergency procedure for importing supplies into the Gaza Strip, which allowed faster pre-clearance. However, this procedure suffered from serious limitations, particularly with regard to managing chartered supply flights. Prior to the arrival of each chartered flight, MSF was required to obtain a landing permit, a process that averaged four weeks. The documentation had to be presented in a specific format to facilitate approval, resulting in substantial extra workload at MSF's logistics centres. This included the preparation of tailored documentation and the coordination necessary to secure charter bookings.

Figure 10
Lead time segments and MSF's performance in Gaza after 7 October 2023

Segment	*Description*	*Performance*
S01 Formulation	Time between stock taking or inventory checking (TS01) and the creation of an order (TS02).	The segments from S01 to S04 (from the formulation of supply orders to their preparation) encompass procedures depending solely on MSF. Due to the emergency mode MSF adopted to respond to the crisis in Gaza, the average total time to complete these four segments fell from 99 days before 7 October 2023 to 45 days during the period covered by this report. This was also significantly less than the average of 87 days required to complete the four segments across all MSF projects after 7 October 2023.
S02 Validation	Time between the creation of an order (TS02) and the reception of final validation (TS03).	
S03 Confirmation	Time between the reception of validation (TS03) and confirmation of the order by the supply centre (TS04).	
S04 Preparation	Time between confirmation by the supply centre (TS04) and completion of the preparation and packing of the order (TS05).	
S05 Documentation	Time taken by the supply centre after the completion of packing of the order (TS05) to prepare cargo documentation in accordance with the requirements of the recipient country, whereupon a request is made for a green light (TS06) to dispatch the goods.	This segment depends on the time it takes the MSF supply centre to prepare the cargo documentation according to the stipulations of the recipient country. Israel's requirements were already extensive prior to 7 October 2023 and were not reduced despite the dire situation in the Gaza Strip.
S06 Pre-clearance	Time taken by the mission to conduct pre-clearance after the supply centre has requested a green light (TS06), and then to give that green light (TS07), at which point the supply centre can organise transportation of the goods.	Average pre-clearance lead time for shipments to Gaza fell significantly from 78 days before 7 October 2023 to 27 days (in many instances, goods were packed and dispatched without waiting for the COGAT authorisation to enter Gaza). It remained significantly higher than the average pre-clearance lead time for all MSF projects, but as with documentation lead time, this was a result of Israel's policy.
S07 Consolidation	Time taken after the issuing of a green light by the mission (TS07) to consolidate the shipment and organise transportation, after which the goods are shipped from the warehouse (TS08).	Average consolidation lead time for shipments to Gaza during the period covered by this report was 28 days, an increase from 21 days prior to 7 October 2023, and significantly higher than the 16 days for all MSF projects during the report period.
S08 Transportation	Time between the shipment date (TS08) and the reception of the goods at the point of dispatch (port or airport) (TS09).	Transportation lead time depends less on procedures than on mode of transport used and distance. As Gaza is closer to MSF logistics centres in Europe than many other MSF projects, the average transportation lead time to Gaza after 7 October 2023 remained lower than that for all shipments worldwide, at 27 days compared with 31 days.
S09 Reception	Time between the reception of the goods at the point of dispatch (TS09) and confirmation of their reception at the project's coordination warehouse (TS10).	Delays in approval of goods by COGAT may have had a significant impact on reception lead times for Gaza. Average reception lead time was 33 days, compared with 23 days prior to 7 October 2023 and 18 days across MSF projects worldwide during the period covered by this report.

Under a 2023 agreement between Israel and Egypt, all chartered flights arriving at El Arish military airport had to be processed by the WHO, which was responsible for requesting landing permits and receiving all imported cargo under its name, thereby becoming the official owner of the supplies. Moreover, the Egyptian government mandated that all aid flows to the border with Gaza be coordinated by the ERC. This arrangement placed a massive logistical burden on the WHO and ERC, which were responsible for receiving, inspecting, repackaging, and transporting incoming aid from all INGOs. The ERC's ability to handle cargo depended heavily on available trucks, personnel, and other logistical resources. The more capacity the two organisations had; the more aid could be processed.

Due to these resource limitations, the import procedure limited MSF to a maximum of one charter flight per month. Furthermore, the WHO requested cargo volumes of less than 150m^3 per flight. While larger-capacity charter options were technically available, they exceeded WHO's handling capabilities. As a result, although the volume of supplies ordered for dispatch from MSF's European supply centres regularly exceeded the monthly allocation, the organisation was forced to prioritise only the most urgent 150m3 of cargo –intended to serve all MSF's Gaza operations — while doing without many other supplies. These limitations translated to an average of approximately six truckloads per month, a volume far below what was required to sustain MSF's intended scale of humanitarian operations.

At the onset of the response, maritime shipments were not a viable option, and for several months MSF was limited to sending international supplies exclusively via charter flights. It was only after the sea corridor to Port Said became viable for INGOs that maritime transport was available. However, shipments involved significant delays, typically taking six to seven weeks as a result of extensive documentation requirements, the time needed to secure container availability on ships bound to Port Said, transit durations and various potential disruptions, including labour strikes and adverse weather conditions at sea.

III.ii. LIMITED CAPACITY TO DELIVER SUPPLIES TO THE GAZA STRIP

Israel did not allow the direct delivery of aid within the Gaza Strip, instead imposing a system of reloading into trucks that relied heavily on scanners, queuing processes and extensive pre-approval bureaucracy. This approach introduced significant complexity that MSF has not encountered in other armed conflict contexts where it has operated.

Under this system, large shipments had to be broken up into smaller shipments to fit truck and pallet requirements. For instance, the contents of a single charter plane to El Arish airport were unloaded into six Egyptian trucks, which had to be unloaded and their contents reloaded into eight Palestinian trucks on the other side of the Gaza border. This repeated loading and unloading process inevitably delayed aid deliveries and increased operational complexity, rendering the system slow and inefficient. By contrast, in other armed conflict

contexts, charter flights are unloaded directly in the area of operation and dispatched straight to our medical facilities — without restrictions on cargo size or content, prior approval requirements and generally without additional inspections beyond those conducted at the airport or port of entry.

In the dire humanitarian context of the Gaza Strip, every single truck carried goods of potentially life-saving importance. According to the Association of International Development Agencies (AIDA), a single truck can deliver winter clothes for 21,000 people, ready-to-eat food kits for 14,000 people or emergency drug and medical kits for up to 10,000 people.[37]

Prior to 7 October 2023, the volume of goods — both humanitarian and commercial — entering Gaza was significantly higher. According to OCHA, in August 2023 a total of 12,076 truckloads of authorised goods, excluding fuel and gas, entered Gaza via Israeli and Egyptian crossings.[38] This represented an average of 390 trucks per day, or 447 excluding Saturdays or 525 excluding non-working days in Israel or Egypt. As illustrated in the column chart below, while August 2023 showed a slightly elevated volume, the daily average between 2015 and 2022 consistently exceeded 300 (excluding Saturdays) or 360 trucks (excluding 2-day weekends). Humanitarian organisations have estimated a figure of 500 trucks per day as the pre-7 October 2023 baseline,[39] but it is important to note that this level of truck movements was in the context of a strict blockade already imposed by Israel and was significantly below actual needs. As such, it was a baseline that was already insufficient to meet the requirements on the ground.

In the 24 days following 7 October 2023, only 218 trucks were able to enter the Strip — an average of just nine trucks per day. While the numbers gradually increased in the subsequent weeks, the overall volume of goods being brought in remained well below the needs of the population. Between November 2023 and December 2024, an average of 3,496 trucks per month were permitted entry, which equates to approximately 114.6 trucks per day or 133.7 trucks per operational day (excluding Saturdays).[40]

The following chart shows the monthly number of truck entries into Gaza from 7 October 2023 to 18 January 2025, highlighting both the insufficiency and the inconsistent nature of the humanitarian supply chain during this time.[41]

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37 AIDA, "Snapshot of deprivation of humanitarian aid in the Gaza Strip since January 2024", *Reliefweb*, 22 February 2024, https://reliefweb.int/report/occupied-palestinian-territory/snapshot-deprivation-humanitarian-aid-gaza-strip-january-2024

38 OCHA, "Movement in and out of Gaza: update covering August 2023", 18 September 2023, https://www.ochaopt.org/content/movement-and-out-gaza-update-covering-august-2023

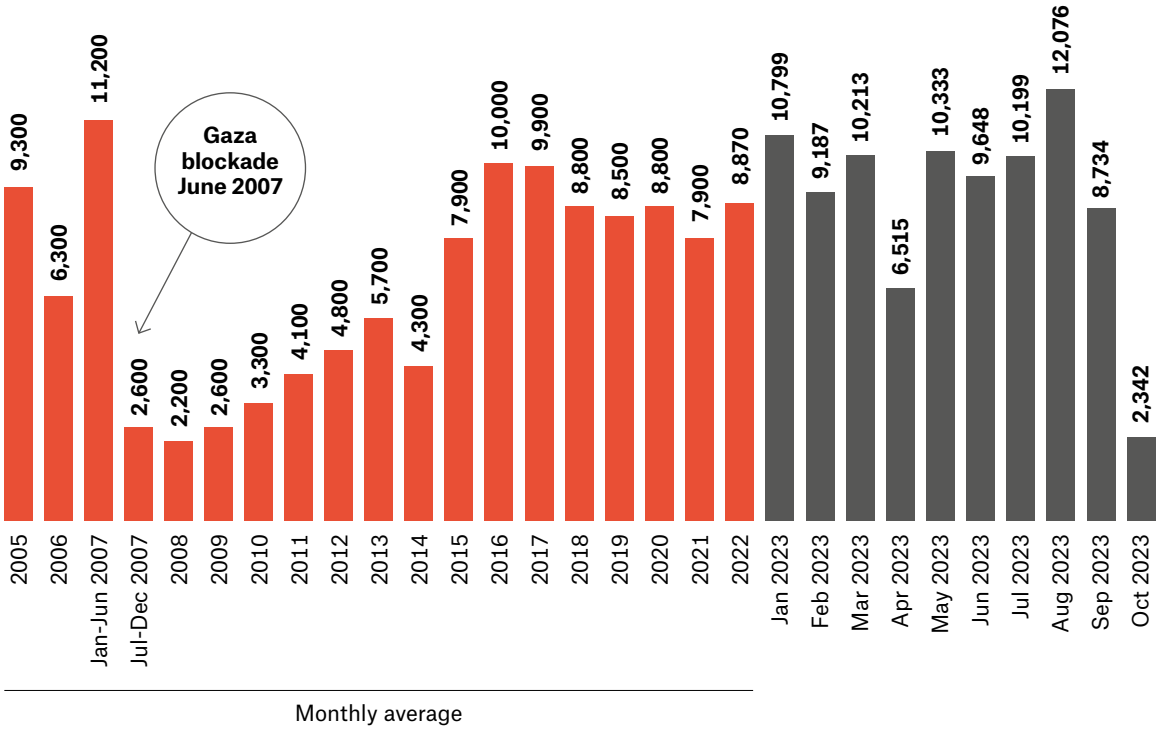
39 Daniel Johnson, "Gaza: Aid trucks still waiting for Israeli green light inside enclave", 21 May 2025, https://news.un.org/en/story/2025/05/1163516

40 The monthly average is multiplied by 12 and divided by 366, 2024 being a leap year. The extra months are added pro rata to get the daily average for a month of average length.

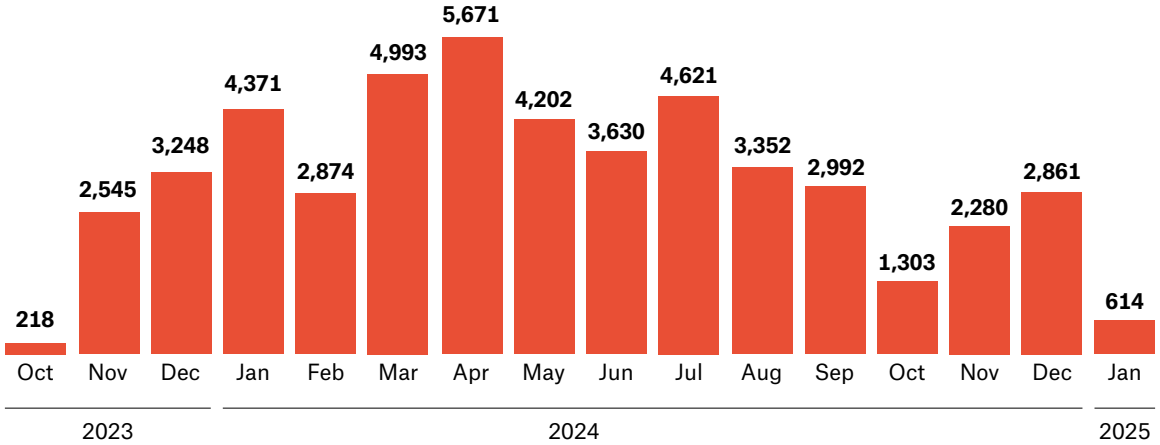
41 As indicated by OCHA, the chart shows "collected humanitarian truckloads as monitored by UN agencies, excluding fuel and some cargo collected by NGOs and third parties. Commercial trucks are not captured in the totals after 7 May [2024], as the UN has been unable to directly observe the arrival of private sector cargo. Since that time, some of the

Figures 11 and 12

Number of truckloads entering Gaza per month, excluding fuel and gas



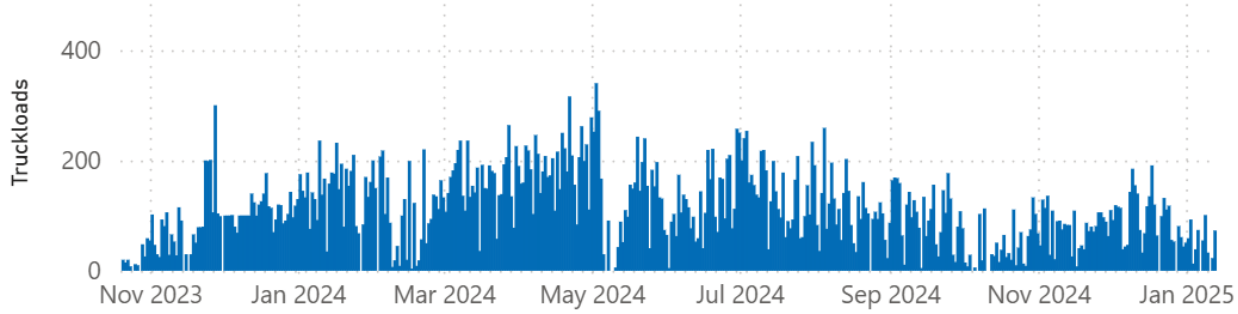
Sources: OCHA, "Gaza crossings: movement of people and goods", https://www.ochaopt.org/data/crossings, and OCHA, "Movement in and out of Gaza: update covering August 2023", 18 September 2023, https://www.ochaopt.org/content/movement-and-out-gaza-update-covering-august-2023.



Source: "Gaza crossings: movement of people and goods", https://www.ochaopt.org/data/crossings. Data: OCHA, UNRWA, WFP.

Figure 13

Number of truckloads entering Gaza per day, excluding fuel and gas, and number of days accessible for crossing and number of truckloads that entered in each entry point between 7 October 2023 and 19 January 2025



Entry points	Days accessible for collection	Truckloads
Kerem Shalom	349	27,562
Rafah	179	11,080
Erez West	137	5,795
Erez	48	2,350
Gate 96	85	2,312
Floating dock	12	603
Kissufim	6	72

Source of column chart and bar chart of entry points (screenshots): "Gaza crossings: movement of people and goods", https://www.ochaopt.org/data/crossings. Data: OCHA, UNRWA, WFP.

According to Galit Raguan, the representative of the State of Israel in the case brought against Israel by South Africa at the ICJ regarding the application of the Convention on the Prevention and Punishment of the Crime of Genocide in the Gaza Strip: "Israel has publicly stated repeatedly that *there is no limit* on the amount of food, water, shelter or medical supplies that can be brought into Gaza" (emphasis in original).[42] The same consistent claim of "there is no limit to the amount of humanitarian aid that can enter the Gaza Strip" has been repeated by Israeli authorities, for instance on X[43] and in interviews.[44] However, the reality on the ground during the period covered by this report contradicted these statements, as MSF was able to bring in only a fraction of the supplies it required, as a result of factors external to its operations.

collected truckloads have also not reached their destinations due to security incidents, including armed looting." OCHA, "Gaza crossings: movement of people and goods", https://www.ochaopt.org/data/crossings

42 International Court of Justice, "Public sitting (...) Application of the Convention on the Prevention and Punishment of the Crime of Genocide in the Gaza Strip (South Africa v. Israel)", reference CR 2024/2, 12 January 2024, p. 47, https://www.icj-cij.org/sites/default/files/case-related/192/192-20240112-ora-01-00-bi.pdf

43 Post on COGAT X account, 3 March 2024, https://x.com/cogatonline/status/1764378984907739629

44 Israel: State of a nation with Eylon Levy, "Israel has placed no limit on the amount of humanitarian aid that can get into Gaza", *YouTube*, 12 January 2025, https://www.youtube.com/watch?v=c8AgTPR7kV0

The WHO-led convoys, typically escorted by the UN and under Israel's full control, had a limited capacity, e.g. only two shipments per week of 30 trucks each — far below the volume required to meet the urgent humanitarian needs in Gaza. This limited capacity was a result of the system established by Israel. The prioritisation processes determined which products were allowed to enter first, as the capacity for delivery into Gaza remained limited. Israel's unpredictable restrictions and practices have often required the UN to make rapid decisions on the prioritisation of incoming supplies on the basis of their own assessment of needs. Additionally, the Egyptian authorities established their own priorities, which were based not only on the urgency of need but also on the identity of the organisation seeking to bring in the supplies. For instance, Red Crescent organisations from Qatar and the United Arab Emirates, both allies of Egypt, were given priority.

On numerous occasions MSF had trucks stationed in Egypt ready to enter the Strip, with contents fully documented and approved, yet they were denied entry. This was either because the week's allocated quota for the specific type of aid carried by the trucks had already been reached, or because the quota set that week was so limited that the teams had to wait until the following week in the hope it would be increased. For several weeks, the highest allocation percentage was reserved for food items; however, MSF had no food shipments ready to enter, but rather trucks with water and sanitation supplies — such as soap, cleaning materials, shampoo and related items. Such items were critically needed for patients suffering from skin diseases in MSF health centres, while the desperate general population was often paying exorbitant prices for them on the local market (for instance, US$10 in October 2024 for a 75g piece of low-quality soap). Nevertheless, these shipments could not be delivered.

The issue was never a matter of determining whether food or soap — or water or medical supplies — was more important. Rather, the fundamental question was: if *no limit* existed, as claimed by the Israeli authorities, why was there not enough capacity to accommodate all essential aid?

Entry points, queues and scanning bottlenecks

Before 7 October 2023, the main access to the Gaza Strip was through checkpoints along its northern border with Israel. After the attacks, all crossing points were closed until October 21, when trucks began to cross through Rafah. From that moment, Israeli authorities inspected all goods entering the Strip at Nitzana, located 46 kilometres south-east of Rafah, to which trucks then had to continue in order to cross. In December 2023, Israel opened a second inspection point for international aid at Kerem Shalom, closer to Rafah than Nitzana.

Every day, several hundred trucks waited in long queues to be inspected prior to delivering their contents into Gaza. These trucks often waited for weeks, sometimes even months, which severely impacted projects that depended on the supplies they were bringing. Humanitarian organisations often identified the bottleneck caused by Israel's inspection mechanisms as the primary cause of these protracted delays. The Israeli authorities maintained that

their inspection capacity could handle up to 250 trucks a day at Nitzana and attributed delays to the capacity of UN agencies to collect the cargo after inspection.[45] The UN denied this claim.[46] As early as December 2023 the UN Humanitarian Coordinator for the Occupied Palestinian Territory, Lynn Hastings, stated that "the conditions required to deliver aid to the people of Gaza do not exist."[47]

According to interviewees, when the Rafah border was open before May 2024, the vehicle scanners there could scan multiple trucks at once. However, at Kerem Shalom, the Israeli scanners available were few and smaller, allowing only one truck to be scanned at a time. Additionally, the scanning window was narrow and variable, amounting to only a few hours a day. Trucks had to arrive early, often before 8am, and only a limited number of trucks were authorised to pass each day. If previous trucks took longer than scheduled, later trucks could be rejected.

Other factors had the effect of increasing delays. Some goods such as tobacco and soap became very lucrative commodities after the closure of the border crossing with Egypt in May 2024: a cigarette could sell for as much as 20 dollars in the Gaza Strip.[48] Israel banned the entry of tobacco, soap and other "problematic" items. Smugglers sometimes hid tobacco within pallets or boxes of humanitarian aid. This practice aroused suspicion, leading to extensive searches which often caused damage to pallets and boxes and on occasions ultimately resulted in the rejection of an entire shipment.

From December 2023, but particularly from 24 January 2024 onwards, certain Israeli groups obstructed the delivery of humanitarian aid by blocking trucks. These protests sometimes escalated to violence, including vandalising of cargo, attacks on drivers and setting on fire of trucks at the Kerem Shalom and Nitzana inspection points, as well as at other locations in Israel. On several occasions, Kerem Shalom was closed due to these protests. In response, sanctions were imposed on the Tsav 9 organisation by both

45 *The New York Times*, "Israel announces limited steps aimed at easing Gaza's humanitarian crisis", 7 December 2023, https://www.nytimes.com/live/2023/12/07/world/israel-hamas-war-gaza-news?smid=url-share#israel-announces-limited-steps-aimed-at-easing-gazas-humanitarian-crisis

46 Philippe Lazzarini, "The Gaza Strip: UNRWA calls for unimpeded and safe access to deliver much needed humanitarian aid", UNRWA, 29 December 2023, https://www.unrwa.org/newsroom/official-statements/gaza-strip-unrwa-calls-unimpeded-and-safe-access-deliver-much-needed

47 Lynn Hastings, "Statement of the Humanitarian Coordinator for the Occupied Palestinian Territory, Lynn Hastings", United Nations, 4 December 2023, https://www.un.org/unispal/document/statement-of-the-humanitarian-coordinator-for-the-occupied-palestinian-territory-lynn-hastings/

48 Mehul Srivastava and Neri Zilber, "Single cigarette costs $20 in Gaza as prices for basic goods spiral", *Financial Times*, 7 June 2024, https://www.ft.com/content/29f18509-a4c0-4a18-b524-e4d0c5e5e61c

the United States [49] and the European Union.[50] The US State department called the group "a violent, extremist Israeli group" and blamed it for blocking convoys of humanitarian aid to Gaza and attacking trucks.

While queues, delays and restrictions were generally the norm, evidence suggests that with sufficient political will, significant improvements in humanitarian access would have been possible. A notable example illustrates this point. In early May 2024, Israeli forces entered Egyptian territory to take control of access to the Rafah crossing. This incursion triggered a diplomatic crisis with Cairo and resulted in the complete closure of the border. The closure came at a critical moment, as the flow of aid trucks into Gaza had reached its highest point since 7 October 2023. The flow of supplies was abruptly halted and did not return to previous levels for the remainder of 2024. The inability to bring humanitarian supplies into Gaza via Egypt generated significant international pressure, most notably from the United States, prompting a response from Israeli authorities. COGAT reached out to humanitarian organisations to inform them that the Kerem Shalom crossing remained open. MSF's supply coordinator received calls from COGAT twice a day, offering smoother conditions for the entry of humanitarian supplies and requesting any shipments ready for delivery. At that moment, MSF had no supplies ready to dispatch via Kerem Shalom. But beyond logistical readiness, other critical factors were at play. Humanitarian organisations were reluctant to send supplies through Kerem Shalom due to the poor security conditions prevailing on the Gaza side of the border: Israeli strikes, intense ground fighting and the threat of armed hold-ups made the area extremely dangerous. Truck drivers were unwilling to risk travelling through such hazardous conditions. In response, COGAT offered the possibility of sending supplies from Jordan, where MSF had some goods ready to ship. However, even this option was complicated by the continuation of the import procedures already imposed by Israel, which involved substantial delays and bureaucratic hurdles.

Such paradoxical and contradictory situations have been frequent. As a former MSF supply coordinator in Jerusalem put it:

> "It's a game, a system in which Israeli authorities outwardly demonstrate a willingness to facilitate humanitarian aid, while simultaneously imposing a framework of constantly shifting regulations marked by arbitrariness, ambiguity, unpredictability and inefficiency. It is a strategy that presents as cooperative, yet subtly obstructs operations at every turn."

49 Emma Graham-Harrison, "US imposes sanctions on 'extremist Israeli group' for blocking Gaza aid", *The Guardian*, 14 June 2024, https://www.theguardian.com/world/article/2024/jun/14/us-imposes-sanctions-on-extremist-israeli-group-for-blocking-gaza-aid

50 The Council of the European Union, "Council Decision (CFSP) 2024/1967 of 15 July 2024 amending Decision (CFSP) 2020/1999 concerning restrictive measures against serious human rights violations and abuses", *Official Journal of the European Union*, EUR-Lex, https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=OJ:L_202401967

III.iii. AUTHORISATION PROCESS: ARBITRARY DECISIONS, DELAYS AND FAILURES TO RESPOND

MSF submitted requests for authorisation of shipments to COGAT as soon as each order was packed at the supply centre in Europe (time stamp 05, order packing) — or even before. This practice was aimed at minimising delays, as it was well-known that COGAT's authorisation process could sometimes take months. As a result, even if the goods were ultimately rejected by COGAT, they were already packed and dispatched, ensuring their arrival in the dispatch country. The time that COGAT took to make its decision had no impact on the order until the last lead time segment (lead time segment 09: order reception). However, it determined whether the goods could ultimately be delivered from the dispatch country to the project site. Ultimately, MSF made the decision to stop shipping items without prior authorisation in order to avoid delays affecting the rest of items in the same shipment.

Certain items could take several months to be authorised, and COGAT's response was inconsistent — the same items could either be authorised quickly, take months to be authorised or be rejected altogether; at times, authorisation requests did not even receive a response. This uncertainty left those dependent on MSF's assistance in a precarious situation, as life-saving items could not wait. The process and criteria used by COGAT seemed arbitrary and ill-suited to the urgency required by the dire humanitarian conditions in Gaza. Below are a few examples illustrating the resulting challenges.

Oxygen concentrators are critical medical devices essential for the survival of many MSF patients. They filter nitrogen from the air, providing purified oxygen to treat malnourished children with severe anaemia, patients suffering from significant blood loss, and newborns with breathing difficulties, among other medical uses. MSF repeatedly attempted to bring oxygen concentrators into Gaza, but the authorisation process was erratic, with authorisation requests for shipments of exactly the same model, with the same specifications, being treated in an inconsistent manner. Sometimes the requests were approved (taking an average of 52 days for the 10-liter version), while on other occasions they were rejected (after an average of 33 days) without any explanation from COGAT, and at other times no response was received. This inconsistency had severe implications for patient care, as MSF was unable to predict when, or if, the devices would arrive. As Mari Carmen Viñoles, MSF's Director of Operations, said: "Without this simple device, our medical teams in Gaza were forced to witness their patients die from entirely preventable causes." [51]

51 Mari Carmen Viñoles, "The near impossible task of getting lifesaving supplies into Gaza", MSF, 2 May 2024, https://www.msf.org/near-impossible-task-getting-lifesaving-supplies-gaza

Viñoles also referred to fridges and freezers:

> "In early November 2023, we made a request to Israel to bring fridges and freezers into Gaza. These are essential for storing medicines and vaccines, which require low temperatures, such as insulin for diabetes, oxytocin to reduce post-partum haemorrhaging, and suxamethonium, used in anaesthesia to induce muscle paralysis. It was not until April — five months later — that the request was approved."[52]

Authorisation requests for plain 2mm thick iron sheets 2m x 1m in size, took on average 84 days to be approved by COGAT, while the identical but larger item, 2m x 2m in size, took on average only 49 days. In some instances, the 2m x 2m sheets were rejected in less than 24 hours. Huge inconsistency was also observed in the authorisation of 4m x 60m rolls of plastic sheeting: some requests were rejected in less than 24 hours, while others were approved after an average of 23 days. Iron sheets are essential for repairs, while plastic sheeting is a critically important multi-purpose product widely used in humanitarian assistance, especially for constructing shelter.

The authorisation problem extended to many other vital supplies. Items such as satellite telecommunications systems and vehicles (both critical for team safety and mobility), water desalination kits, water pumps, solar-powered equipment (including electrical systems for medical facilities), generators, ultrasound scanners, external defibrillators and intravenous sodium chloride solutions (crucial for patient rehydration and drug dilution), among many others, all faced the same erratic authorisation process. These items, some of which are potentially life-saving, were sometimes authorised but sometimes rejected, and the responses often came with significant delays — or did not come at all.

COGAT typically took over a month to respond to requests for authorisation. Response times for medical items were significantly longer than for communications equipment (see table and graphs below); conversely, the latter was more likely to be rejected. The inconsistency of the authorisation process hampered MSF's ability to plan and deliver necessary services in Gaza, impacting the quality and timeliness of humanitarian assistance.

The medical items that took the longest to receive a response from COGAT, whether authorisation or rejection, included radiation shielding aprons or collars (averaging 122 days), freezing indicators, thermometers, ultrasound machines, filter compressors, pressure regulators and even scalpels. The logistical items that took the longest included solar panels for energy (averaging 225 days), batteries, flow meters, pumps, pressure gauges, printer toners cartridges, fire extinguishers and tents. Among communications items,

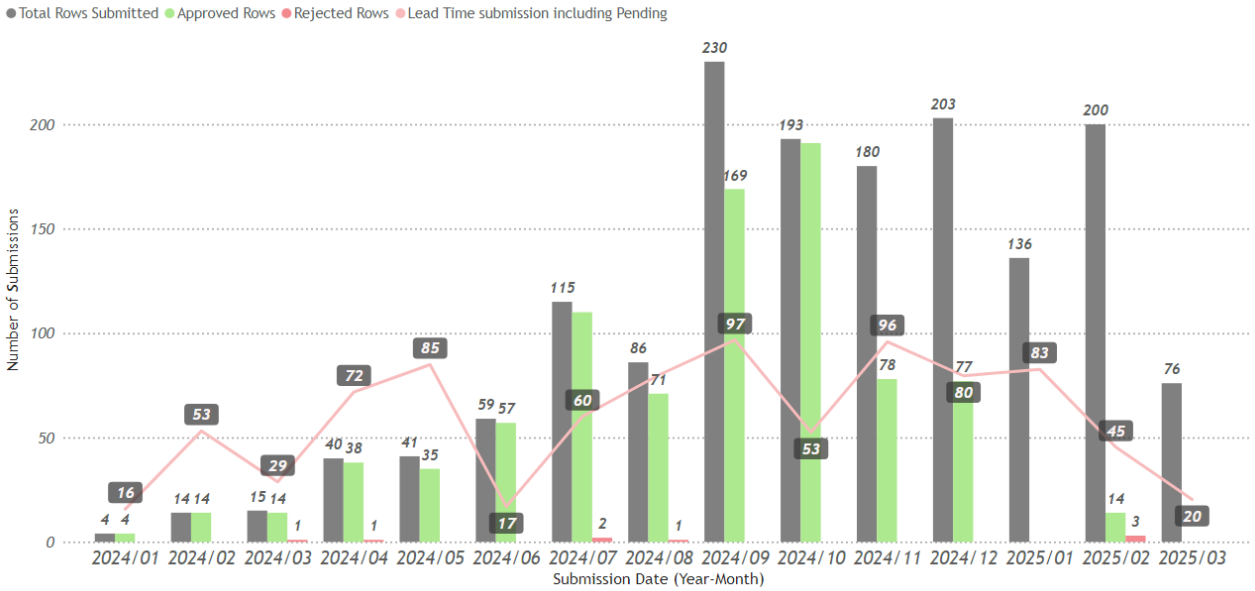
52 Mari Carmen Viñoles, "The near impossible task of getting lifesaving supplies into Gaza", MSF, 2 May 2024, https://www.msf.org/near-impossible-task-getting-lifesaving-supplies-gaza

Figures 14, 15 and 16

Average response times to MSF authorisation requests for different categories of goods, 7 October 2023 to 19 January 2025

44.97 days	**41.41 days**	**29.80 days**
Medical items	**Logistical items**	**Communications items**

Authorisation rates and average response times for requests for authorisation of individual shipments of medical items, January 2024 to March 2025



Authorisation rates and average response times for requests for authorisation of individual shipments of logistical items, January 2024 to March 2025

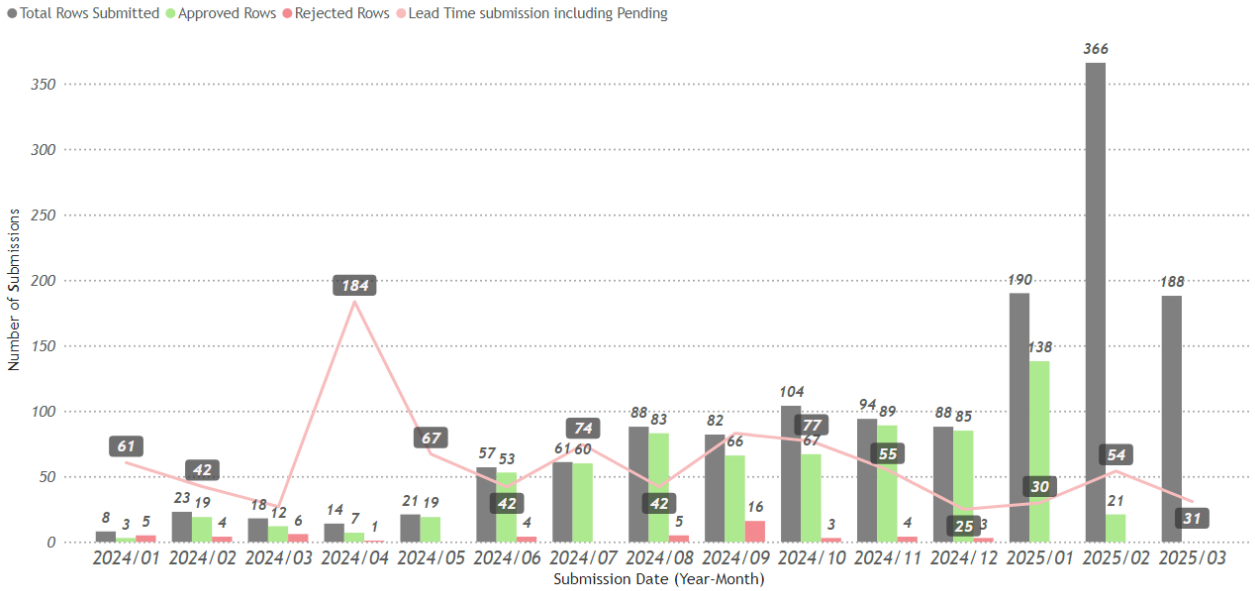
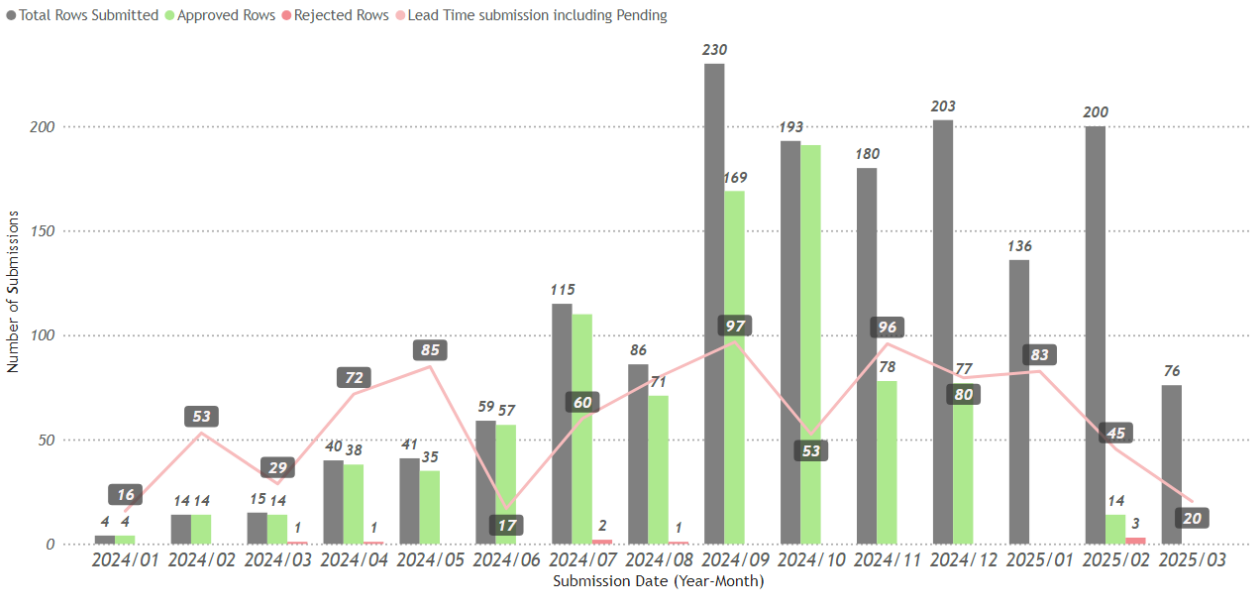


Figure 17

Authorisation rates and average response times for requests for authorisation of individual shipments of communications items, January 2024 to March 2025



docking units (averaging 132 days), satellite equipment, laptop computers, UPS systems, mobile phones and routers took the longest. Annex 2 presents a detailed list of the items with the longest average response times, showing the response time and whether each item was authorised or rejected.

Even more concerning was the long list of authorisation requests that never received any response from COGAT. As of early April 2025, there were 1,266 requests that had been pending for over a month. Of these, 180 had been pending for more than 150 days. The pending requests with the longest delays included water pumps, generators, autoclaves, oxygen concentrators, centrifuges, crutches, scalpels, razors, otoscopes, demountable hospital beds, newborn-infant beds, phones and other communications equipment, freezing indicators, syringes, glucometers, medical lamps, thermometers, scissors, obstetric materials and forceps, ultrasound machines, chlorine and many more.

This extended delays in receiving critical medical supplies left MSF with little alternative but to work without these essential items, severely hampering the quality of care MSF professionals could provide. Annex 3 lists the 180 authorisation requests that had been pending for over 150 days as of early April 2025, with the oldest request dating back 362 days.

Case study: autoclave analysis

An autoclave is a critical medical device used to sterilise equipment before it is used in surgical procedures. Sterilisation ensures that all viruses, bacteria, fungi and spores are inactivated, making autoclaves indispensable for providing quality medical care.

However, the authorisations for the supply of autoclaves to the Gaza Strip were marked by frequent rejections and delays. MSF submitted authorisation requests to COGAT for a total of 47 autoclaves of four different types from January 2024. As of April 2025, only 16 autoclaves (34%) had been authorised, while the remaining 31 had either been rejected or were still awaiting a response. Both these alternatives were particularly significant for the following reasons:

- **Rejected items.** Autoclaves are not expressly categorised as dual-use items in the Defense Export Control Order (Controlled Dual Use Equipment transferred to Palestinian Civil Jurisdiction Areas), 2008.[53] Nor are they included in the Restricted Import List, Gaza Strip 2013 created by the Coordination and Liaison Administration for Gaza, a body part of the COGAT.[54] Autoclaves were not specifically listed as requiring a "security check" in a document provided by COGAT in May 2024, which was made no longer valid few weeks later,[55] but they could fall under the general category of "device for sterilisation" requiring such check. However, what was especially troubling was the apparent arbitrariness in the decision-making process. The same type of autoclave, under identical circumstances, could be either authorised or rejected, as shown in the table below. This inconsistency created uncertainty and significantly hampered MSF's ability to deliver timely and life-saving care.

- **Delayed items.** As of 28 February 2025 most of MSF's approval requests for autoclaves remained neither approved nor rejected, with decisions still pending. At least six of these requests, relating to a total of 10 autoclaves, had been delayed for 250 days or more. Most of these autoclaves were of the same types as others that had been approved at different times. This further highlights the apparent arbitrariness of the decision-making process, as illustrated in the table below.

53 "Defense Export Control Order (Controlled Dual Use Equipment transferred to Palestinian Civil Jurisdiction Areas), 2008", 2008, https://gisha.org/UserFiles/File/LegalDocuments/procedures/merchandise/170_2_EN.pdf

54 Coordination and Liaison Administration to Gaza – COGAT, "Restricted Import List Gaza Strip 2013", https://www.gisha.org/userfiles/file/LegalDocuments/procedures/merchandise/55en.pdf

55 See next section III.iv for details.

Figure 18

COGAT responses to MSF authorisation requests for autoclave imports to Gaza, January 2024 to April 2025

47	7	8	29 %
Total quantity submitted	Approved Rows	Total COGAT received	AcceptedPercentage

List of COGAT items

Item Code	Item Name	Sum Pending Quantity	Sum Rejected Quantity	Sum Approved Quantity	Acceptance Ratio	Avg Lead Time	Total quantity submitted
KMEDMAUT39-	MODULE, AUTOCLAVE, STEAM, 39 l	5	0	2	100 %	9	7
ESTEAUTE90-	AUTOCLAVE TBM 90 l, vertical, 220V/380V/gas/kerosene, drying	4	1	2	50 %	66	7
ESTEAUTE39-	AUTOCLAVE 39 l (All American), w/o burner, int. Ø 35 cm	11	2	12	80 %	44	25
KMEDMAUT90-	MODULE, AUTOCLAVE, STEAM, TBM 90 l	6	2	0		66	8
Total		**26**	**5**	**16**	**64 %**	**45**	**47**

Precentage Of Quantity Approved, Rejected, and Pending

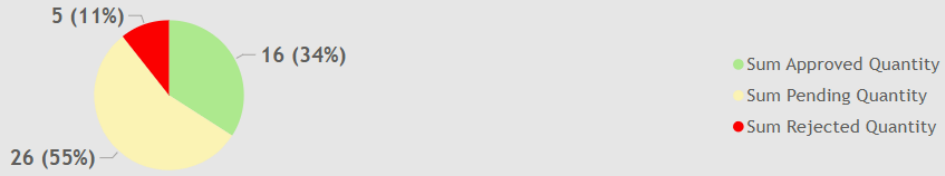


Figure 19

MSF autoclave authorisation requests to COGAT still pending as of 28 February 2025

No.	Item Code	Item Name	Item Quantity Requested	Submission Date	Request pending since (days)	Had the item been Rejected?	How many times has been rejected	Had the item been Accepted?	How many times has been accepted	Acceptance Ratio
149	KMEDMAUT90-	MODULE, AUTOCLAVE, STEAM, TBM 90 l	2	4/28/2024	306	Yes	2	No	0	0 %
168	ESTEAUTE90-	AUTOCLAVE TBM 90 l, vertical, 220V/380V/gas/kerosene, drying	1	5/5/2024	299	Yes	1	Yes	1	50 %
169	ESTEAUTE39-	AUTOCLAVE 39 l (All American), w/o burner, int. Ø 35 cm	1	5/5/2024	299	Yes	1	Yes	4	80 %
170	ESTEAUTE39-	AUTOCLAVE 39 l (All American), w/o burner, int. Ø 35 cm	1	5/5/2024	299	Yes	1	Yes	4	80 %
196	ESTEAUTE90-	AUTOCLAVE TBM 90 l, vertical, 220V/380V/gas/kerosene, drying	1	5/13/2024	291	Yes	1	Yes	1	50 %
314	KMEDMAUT90-	MODULE, AUTOCLAVE, STEAM, TBM 90 l	4	6/23/2024	250	Yes	2	No	0	0 %
1382	ESTEAUTE90-	AUTOCLAVE TBM 90 l, vertical, 220V/380V/gas/kerosene, drying	1	10/20/2024	131	Yes	1	Yes	1	50 %
1686	ESTEAUTE39-	AUTOCLAVE 39 l (All American), w/o burner, int. Ø 35 cm	6	11/17/2024	103	Yes	1	Yes	4	80 %
1829	KMEDMAUT39-	MODULE, AUTOCLAVE, STEAM, 39 l	4	12/8/2024	82	No	0	Yes	2	100 %
2184	ESTEAUTE39-	AUTOCLAVE 39 l (All American), w/o burner, int. Ø 35 cm	2	1/12/2025	47	Yes	1	Yes	4	80 %
2391	ESTEAUTE90-	AUTOCLAVE TBM 90 l, vertical, 220V/380V/gas/kerosene, drying	1	1/26/2025	33	Yes	1		1	50 %
2392	ESTEAUTE39-	AUTOCLAVE 39 l (All American), w/o burner, int. Ø 35 cm	1	1/26/2025	33	Yes	1		4	80 %
2754	KMEDMAUT39-	MODULE, AUTOCLAVE, STEAM, 39 l	1	2/6/2025	22	No	0		2	100 %
2897	KMEDMAUT39-	Autoclave 50L	1	2/12/2025	16	No	0		2	100 %
Total										64 %

III.iv. EXCLUSION OF MUCH-NEEDED GOODS CONSIDERED TO BE "DUAL USE"

Israel regulated the entry of all goods, including humanitarian aid, into the Gaza Strip, and classified humanitarian goods into four categories: "food, water, medical supplies and shelter equipment" (see transcripted text of COGAT document below).[56] COGAT uses additional categories in its reporting, including "gas", "mixed aid", "UN and int. org. equipment" and "essential infrastructure equipment", as well as "fuel".[57]

Certain goods were considered by Israel to be "dual use": "items that can be repurposed by the Hamas Terrorist Organization for terrorist purposes". These items "need[ed] to go through a security evaluation" and required special permission to be brought in.

Israel does not provide humanitarian organisations with a list of dual-use items. After months of uncertainty, in May 2024 COGAT organised a Zoom meeting with selected humanitarian organisations with which they were in

56 The image is a transcription of a document provided to MSF by COGAT in their offices in Tel Aviv in May 2024. This document ceased to be valid a few weeks later.

57 See COGAT, "Gaza. Humanitarian Aid Data", https://govextra.gov.il/cogat/humanitarian-efforts/main/, accessed 9 April 2024.

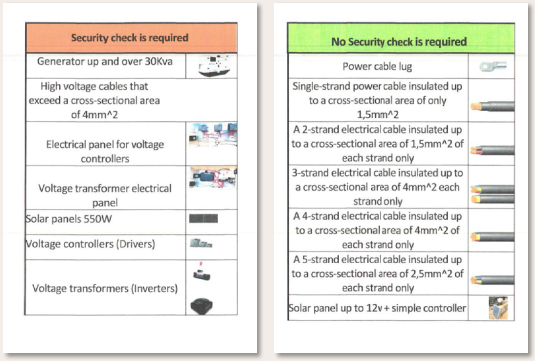
Dual use items list

- Israel is facilitating humanitarian aid for the Gaza Strip under four categories: food, water, medical supplies and shelter equipment. Under these categories, items considered dual use (items that can be repurposed by the Hamas Terrorist Organization for terrorist purposes) need to go through a security evaluation.
- The f ollowing list specifies the categories of items considered dual use needing a security evaluation.
- The following list is dynamic and may change according to the latest security concerns.
- For any further questions or clarifications regarding the list, please contact COGAT via the regular working channels.

direct communication, during which they announced the existence of a new dual-use list of products that required a security check. However, they refused to share the document electronically and instead required organisations to collect it in person from the COGAT office in Tel Aviv. For some organisations, this presented a logistical challenge, as their supply focal points were based overseas or in Gaza. In MSF's case, a coordinator based in Jerusalem travelled to Tel Aviv to retrieve the list. However, just a few weeks later, COGAT stated that the list was no longer valid — without offering any replacement, explanation or clarification.

Images below are scans of the document provided to MSF by COGAT in their offices in Tel Aviv in May 2024, which included a list of products that required a security check:

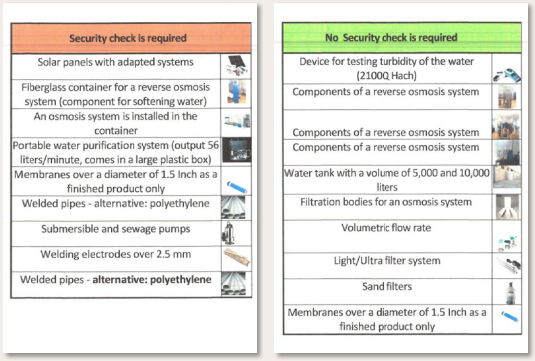
Electricity and accessories



Security check is required
Generator up and over 30Kva
High voltage cables that exceed a cross-sectional area of 4mm^2
Electrical panel for voltage controllers
Voltage transformer electrical panel
Solar panels 550W
Voltage controllers (Drivers)
Voltage transformers (Inverters)

No Security check is required
Power cable lug
Single-strand power cable insulated up to a cross-sectional area of only 1,5mm^2
A 2-strand electrical cable insulated up to a cross-sectional area of 1,5mm^2 of each strand only
3-strand electrical cable insulated up to a cross-sectional area of 4mm^2 each strand only
A 4-strand electrical cable insulated up to a cross-sectional area of 4mm^2 of each strand only
A 5-strand electrical cable insulated up to a cross-sectional area of 2,5mm^2 of each strand only
Solar panel up to 12v + simple controller

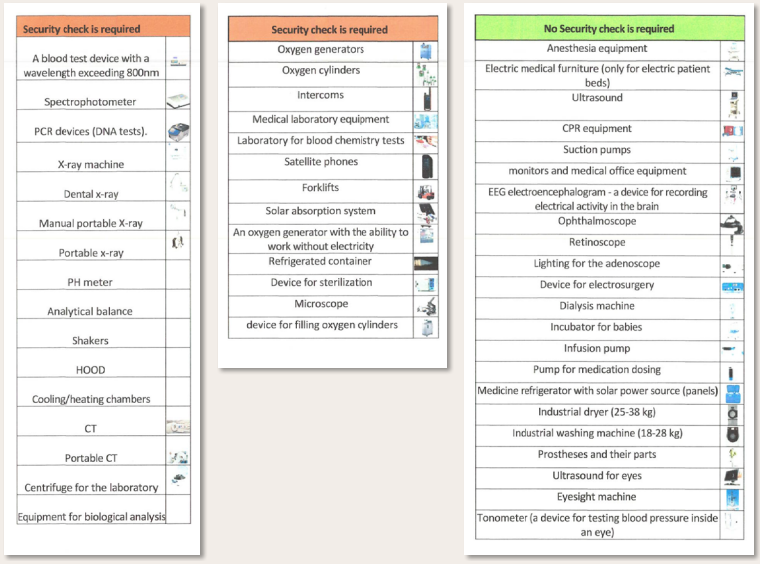
Local, portable desalination plant



Security check is required
Solar panels with adapted systems
Fiberglass container for a reverse osmosis system (component for softening water)
An osmosis system is installed in the container
Portable water purification system (output 56 liters/minute, comes in a large plastic box)
Membranes over a diameter of 1.5 Inch as a finished product only
Welded pipes - alternative: polyethylene
Submersible and sewage pumps
Welding electrodes over 2.5 mm
Welded pipes - **alternative: polyethylene**

No Security check is required
Device for testing turbidity of the water (2100Q Hach)
Components of a reverse osmosis system
Components of a reverse osmosis system
Components of a reverse osmosis system
Water tank with a volume of 5,000 and 10,000 liters
Filtration bodies for an osmosis system
Volumetric flow rate
Light/Ultra filter system
Sand filters
Membranes over a diameter of 1.5 Inch as a finished product only

Equipment for hospitals

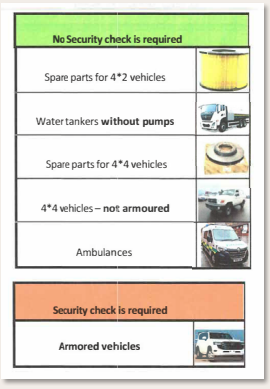


Security check is required
A blood test device with a wavelength exceeding 800nm
Spectrophotometer
PCR devices (DNA tests).
X-ray machine
Dental x-ray
Manual portable X-ray
Portable x-ray
PH meter
Analytical balance
Shakers
HOOD
Cooling/heating chambers
CT
Portable CT
Centrifuge for the laboratory
Equipment for biological analysis

Security check is required
Oxygen generators
Oxygen cylinders
Intercoms
Medical laboratory equipment
Laboratory for blood chemistry tests
Satellite phones
Forklifts
Solar absorption system
An oxygen generator with the ability to work without electricity
Refrigerated container
Device for sterilization
Microscope
device for filling oxygen cylinders

No Security check is required
Anesthesia equipment
Electric medical furniture (only for electric patient beds)
Ultrasound
CPR equipment
Suction pumps
monitors and medical office equipment
EEG electroencephalogram - a device for recording electrical activity in the brain
Ophthalmoscope
Retinoscope
Lighting for the adenoscope
Device for electrosurgery
Dialysis machine
Incubator for babies
Infusion pump
Pump for medication dosing
Medicine refrigerator with solar power source (panels)
Industrial dryer (25-38 kg)
Industrial washing machine (18-28 kg)
Prostheses and their parts
Ultrasound for eyes
Eyesight machine
Tonometer (a device for testing blood pressure inside an eye)

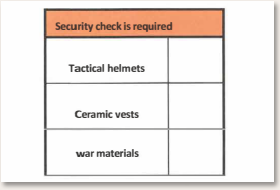
Vehicles and parts



No Security check is required
Spare parts for 4*2 vehicles
Water tankers **without pumps**
Spare parts for 4*4 vehicles
4*4 vehicles – **not armoured**
Ambulances

Security check is required
Armored vehicles

Shielding and war materials



Security check is required	
Tactical helmets	
Ceramic vests	
war materials	

Source: Images taken from the COGAT dual-use items list provided in May 2024.

The Israeli authorities told MSF staff that in the past, Hamas had repurposed metal to construct tunnel structures. MSF was not in a position to assess the potential military significance of certain goods for Palestinian armed groups. However, in a region where metal is abundant in the rubble of destroyed buildings, it was hard to understand why small pieces of metal such as scalpels could be problematic.

> "I've never understood why crutches, printer ink or spare parts for a desalination plant aren't immediately approved. In my line of work, I'd never be allowed to take five months just to approve those items."
>
> MSF deputy supply coordinator

Overall, there were many essential items that MSF was not able to bring in because of the dual-use restriction, severely impacting its medical and humanitarian operations in the Gaza Strip. Annex 4 lists the potential dual-use items for which MSF requested authorisation and that were authorised on at least one occasion while also being rejected on at least one other occasion. The following were some of the issues relating to authorisation with which MSF had to contend:

- **Lack of clarity as to what was permitted and what was not.** An official list of dual-use items was never published, and for almost the entire period covered in this report no such list was even made accessible to humanitarian organisations attempting to bring supplies into Gaza. When humanitarian organisations were finally offered an official list, in May 2024, it was soon declared invalid, as noted above. As a result, MSF, like other humanitarian organisations, was forced to learn through trial and error, compiling its own lists based on past experiences with items that faced difficulties or were denied entry. However, on several occasions, MSF shipments were denied entry without receiving any explanation or identification of the specific products that had caused the refusal. This made it difficult for MSF to refine its own lists of permitted and banned items. Although COGAT occasionally offered to clarify what was not allowed, they often failed to respond to MSF requests for information. While some meetings improved understanding of the position regarding certain items, for complex goods such as generators, motor pumps and autoclaves, among others, answers were typically absent. Often, COGAT neither approved nor rejected requests, leaving MSF teams in a prolonged state of uncertainty.

- **Rejection of specific items leading to rejection of whole shipments.** MSF learned through months of experience that certain items were more likely to be rejected than others. Identifying these problematic goods became crucial, as in some cases the rejection of even a single small item led to an entire truckload being denied entry — forcing the entire delivery process to start over again. Such items included single-use scalpels and even blunt-tipped medical scissors. To avoid jeopardising entire shipments, MSF restricted certain supplies when teams were not confident that they would

be allowed entry. Unfortunately, these self-imposed restrictions included items essential to delivering quality medical care. Items containing metal, or any other material that could potentially be rejected by COGAT, were often excluded to prevent the risk of the whole shipment being turned away. This did not mean that MSF teams stopped trying to bring in these items altogether, but rather that they handled them separately — a process that consumed significantly more time, resources and energy.

- **Delays in local procurement.** Items classified as "dual-use" or otherwise considered problematic by COGAT were not purchased locally until formal authorisation was granted. This avoided wasting resources on goods that would never be allowed entry. Similarly, items destined for international shipment that were likely to be rejected were held at supply centres, pre-packed and ready to ship, but not dispatched until authorisation was secured. This resulted in considerable delays in delivering urgently needed supplies, as procurement and shipping could not occur simultaneously with the authorisation process — they had to follow authorisation, which in some cases might never arrive.

- **Possibility of authorised items still being denied entry.** COGAT clearance did not guarantee entry at crossing points. There were cases where items previously authorised by COGAT were later used as grounds to reject entire truckloads.

Case study: bringing an MSF international cargo into Gaza

In March 2024 an MSF international cargo shipment arrived in El Arish. By 21 March, the cargo was ready for dispatch in eight trucks, two of which were designated 'COGAT trucks' carrying items that required specific Israeli authorisation, which were dispatched a few days after the others. Out of the total of eight truckloads three, including the contents of two of the non-'COGAT trucks', were initially rejected without any explanation from the Israeli authorities, as shown in the table below. MSF identified certain items in truck 1 — such as screws and nuts for bone fixation, and orthopaedic plates — as possible reasons for the rejection. However, the same medical items had also been included in truck 3, which passed inspection without issue. This discrepancy suggested another instance of seemingly arbitrary decision-making.

To mitigate the risk of repeated rejection, all pallets suspected of triggering the rejection of the affected cargos were removed. The remaining cargo in trucks 1 and 7 was re-manifested and successfully resubmitted. Additionally, on 7 April, an extra truck was prepared containing all the previously removed pallets suspected of including 'problematic' items and the truck 5 cargo, consolidated into a single shipment and again accompanied by their respective reference numbers and pre-approval documentation. This time, the cargo was not rejected. However, some pallets were later stolen from the WHO warehouse at the Rafah border, where goods were stored until MSF came to collect them.

Figure 20
Bringing an MSF international cargo into Gaza

Truck number and outcome of the cargo	*Progress to rejection or delivery*	*Date*
Truck 1 **Rejected, then most was delivered**	Manifested and driven to Kerem Shalom, but rejected at there. No explanations given, but MSF suspected the problematic items to be screws and plates. Two pallets were offloaded to be transferred to Gazan vehicle, but the rest of the cargo was required to be manifested and sent again. Suspected problematic items accounted for 622 kg of the 4,667 kg of cargo (or 13%).	25–26/3/24
	Manifested again, but only 20 pallets out of the 27 remaining. No problem at inspection at Kerem Shalom.	31/3–1/4/24
Truck 2 **Delivered**	Manifested and driven to Kerem Shalom. Offloaded, no problem at inspection.	27–28/3/24
Truck 3 **Delivered**	Manifested and driven to Kerem Shalom. Many pallets opened. Contained screws and plates like truck 1, but inspected with no problem. Pallets arrived at WHO warehouse on 27 March.	25–26/3/24
Truck 4 **Delivered**	Manifested and driven to Kerem Shalom. inspected with no problem. Pallets arrived at WHO warehouse on 27 March.	25–26/3/24
Truck 5 **Rejected**	"COGAT truck" — Manifested and driven to Kerem Shalom. Truck rejected at Kerem Shalom — reason unclear, but probably due to the cargo including too many medical devices. All but two pallets had been offloaded and were to be accepted, but the inspector changed his mind.	31/3–1/4/24
Truck 6 **Delivered**	Manifested and driven to Kerem Shalom. Offloaded, no problem at inspection.	27–28/3/24
Truck 7 **Rejected, then most was delivered**	Manifested and driven to Kerem Shalom. Truck inspected and rejected. No explanations provided.	27–28/3/24
	Manifested again, but only 25 pallets out of the 26 remaining. No problem at inspection at Kerem Shalom.	31/3–1/4/24
Truck 8 **Delivered**	"COGAT truck" — Manifested and driven to Kerem Shalom. Offloaded, no problem at inspection.	31/3–1/4/24

III.v. LACK OF SECURITY INSIDE GAZA AFFECTING TRANSPORTATION: THE PROBLEM OF THEFT

Throughout the period covered by this report, the poor security situation was the main challenge faced by MSF in carrying out its operations in the Gaza Strip. This insecurity manifested in various forms; the most significant security impediment for MSF was invariably the large-scale IDF attacks on civilian areas, frequently violating the principles of respect and protection established under international humanitarian law. However, MSF operations also faced violence from other quarters, including armed robbery of essential supplies needed for humanitarian activities. While the arbitrariness and uncertainty that characterised the bringing of supplies into Gaza after 7 October 2023 already posed a significant risk to their successful delivery, the likelihood that all the goods imported would reach project sites intact and in usable condition was further reduced by conditions inside the Strip.

MSF and other humanitarian organisations repeatedly experienced theft of medical and humanitarian supplies. In a situation marked by extreme need and desperation, where even the most basic food requirements are unmet, it is understandable that people may feel compelled to take what their families need. However, much of this theft took the form of robbery from vehicles apparently carried out by organised groups. The identity of those responsible remained unclear for months, and accountability was difficult to establish. The prevailing poor security situation was attributed by different sources to various (but potentially overlapping) actors, including "local gangs", "powerful families", "groups of desperate individuals", and "organised crime."

Some areas were significantly more dangerous for robberies than others — at least, according to accumulated experience. The stretch of road between Kerem Shalom and Rafah was labelled a "no man's land" due to the frequency and intensity of attacks in an area around 800 metres from Kerem Shalom, called by the IDF "the looting [i.e. robbery] zone" according to the Israeli newspaper *Haaretz*,

> "yet the area is under full control of the IDF, with troops stationed just hundreds of meters, and sometimes less, from the roadblocks the armed men erect on the road [...] The IDF lookouts, both on the ground and in the air, operate 24 hours a day along the logistical routes the army has paved throughout Gaza. These are the roads the aid convoys use. Truck drivers and officials from international aid organisations charge that the soldiers can see the attacks on the convoys, yet do nothing."[58]

58 Nir Hasson and Yaniv Kubovich, "The Israeli Army is allowing gangs in Gaza to loot aid trucks and extort protection fees from drivers", *Haaretz*, 11 November 2024, https://www.haaretz.com/israel-news/2024-11-11/ty-article/.premium/the-idf-is-allowing-gaza-gangs-to-loot-aid-trucks-and-extort-protection-fees-from-drivers/00000193-17fb-d50e-a3db-57ff16af0000

For the head of the Gaza office for the UN, the area around Kerem Shalom where robbery from vehicles was rife appeared to be "the only place in Gaza where an armed Palestinian can come within 150 meters of a tank and not get shot".[59] An internal UN memo of October 2024 leaked to the media affirmed that "the gangs 'may be benefiting from a passive if not active benevolence' or 'protection' from the Israel Defense Forces. One gang leader, the memo said, established a 'military like compound' in an area 'restricted, controlled and patrolled by the IDF'."[60] Finally, on 5 June 2025, Prime Minister Benjamin Netanyahu confirmed that Israel had been arming a group — sometimes described as a militia and sometimes as a criminal gang — in the Gaza Strip to strengthen opposition to Hamas.[61] This was a group alleged to have robbed humanitarian aid cargos.

Other particularly unsafe zones where hold-ups often occurred included the Philadelphia corridor, Salah al-Din Road and the Kissufim crossing. In contrast, the Fence Road connecting Kerem Shalom to the Gate 96 access point was generally consider safer, with far fewer incidents of robbery reported. Salah al-Din Road became notorious as the 'death road' for the transportation of supplies due to the frequency and severity of robberies there. On 7 October 2024 a press briefing by the UN Secretary-General's spokesperson affirmed that "Israeli authorities have allocated a single, unsafe road for aid workers to bring in supplies from the Kerem Shalom crossing, where they face active hostilities and violent, armed looting [*sic*], fuelled by the collapse of public order and safety."[62] While this statement did not name the road, other statements from the same period referred to Salah al-Din. The UN spokesperson later said on 26 November that "all humanitarians in Gaza are facing an extremely difficult situation due to the lack of security and armed looting [*sic*], which is the reason why we have been consistently asking for more entry points in Gaza, and more routes to distribute within the Strip."[63] This prevalence of armed robbery had a severe impact on drivers and transporters. According to media reports based on eyewitness accounts, drivers were harassed, beaten, maimed and even killed.

The surge in armed robbery was driven by the lucrative market for even basic goods created by the extreme levels of need in the Gaza Strip, and

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59 Claire Parker, Loveday Morris, Hajar Harb, Miriam Berger and Hazem Balousha, "Gangs looting Gaza aid operate in areas under Israeli control, aid groups say", *The Washington Post*, 18 November 2024, https://www.washingtonpost.com/world/2024/11/18/gaza-looting-aid-convoys-israel-famine/

60 Claire Parker, Loveday Morris, Hajar Harb, Miriam Berger and Hazem Balousha, "Gangs looting Gaza aid operate in areas under Israeli control, aid groups say", *The Washington Post*, 18 November 2024, https://www.washingtonpost.com/world/2024/11/18/gaza-looting-aid-convoys-israel-famine/

61 Emanuel Fabian, Nurit Yohanan, Nava Freiberg and Toi Staff, "Israel providing guns to Gaza gang to bolster opposition to Hamas", *The Times of Israel*, 5 June 2025, https://www.timesofisrael.com/israel-providing-guns-to-gaza-jihadist-gang-to-bolster-opposition-to-hamas/

62 United Nations, "Daily press briefing by the Office of the Spokesperson for the Secretary-General", 7 October 2024, https://press.un.org/en/2024/db241007.doc.htm

63 United Nations, "Daily press briefing by the Office of the Spokesperson for the Secretary-General", 26 November 2024, https://press.un.org/en/2024/db241126.doc.htm

further encouraged by the breakdown of public order and the absence of a functioning civilian government. Interviewees and media reports based on eyewitness accounts described the severe challenges in maintaining even basic security conditions. In one such report, sources indicated that in several instances "the last remnants of the local police forces tried to take action against the looters [*sic*], but were attacked by Israeli troops, who view them as part of Hamas."[64]

Following the ceasefire implemented on 19 January 2025,[65] the frequency of robberies significantly decreased. Reports emerged of retaliatory actions taken against the perpetrators. The theft that persisted — on a much smaller scale — was attributed more to spontaneous mob behaviour than to organised criminal activity by those interviewed for this report. The UN spokesperson reported on 20 January: "So far so good. We don't have any significant problems of violence or looting to report."[66] Forty-two days later, the spokesperson responded to a question as follows:

> "Question: Prime Minister Netanyahu said in a video message yesterday that the reason they're stopping the aid is that Hamas is selling it, and they're preventing Palestinians from accessing it. What can you say on that?
>
> Spokesperson: None of that has been reported back here by our colleagues on the ground. We have seen since the ceasefire is [*sic*] a much freer and more direct flow of aid, and we have not seen any of the looting [*sic*] that we had seen prior to the ceasefire."[67]

After the breakdown of the ceasefire, the UN spokesperson declared on 4 April: "Our humanitarian partners warn that criminal looting [*sic*] and general insecurity are again on the rise, linked to the closure and to lack of basic supplies."[68] On 25 April, the spokesperson said: "Meanwhile, looting of remaining supplies continues, with our partners on the ground reporting that this practice is now less organized and more opportunistic than before the ceasefire — seemingly driven by desperation."[69] And on 28 April the UN

64 Nir Hasson and Yaniv Kubovich, "The Israeli Army is allowing gangs in Gaza to loot aid trucks and extort protection fees from drivers", Haaretz, 11 November 2024, https://www.haaretz.com/israel-news/2024-11-11/ty-article/.premium/the-idf-is-allowing-gaza-gangs-to-loot-aid-trucks-and-extort-protection-fees-from-drivers/00000193-17fb-d50e-a3db-57ff16af0000

65 Although the events after 19 January 2025 fall outside the scope of this study, this analysis has been included for its added value in understanding the situation prior to that date.

66 United Nations, "Daily press briefing by the Office of the Spokesperson for the Secretary-General", 20 January 2025, https://press.un.org/en/2025/db250120.doc.htm

67 United Nations, "Daily press briefing by the Office of the Spokesperson for the Secretary-General", 3 March 2025, https://press.un.org/en/2025/db250303.doc.htm

68 United Nations, "Daily press briefing by the Office of the Spokesperson for the Secretary-General", 4 April 2025, https://press.un.org/en/2025/db250404.doc.htm

69 United Nations, "Daily press briefing by the Office of the Spokesperson for the Secretary-General", 25 April 2025, https://press.un.org/en/2025/db250425.doc.htm

spokesperson concluded: "What we can tell you is that during that interim period where there was a ceasefire, when aid was coming in, we received no reports of looting."[70]

MSF experienced other forms of theft beside armed robbery from vehicles, but was unable to determine exactly where they occurred along the supply chain. From the moment items were packed at MSF logistics centres in Europe or Dubai to the time they reached project sites in Gaza, MSF staff had no means of verifying their condition and even whether they were still present in a consignment.

However, significant theft of MSF supplies undeniably occurred within the Gaza Strip, where MSF teams experienced robberies and assaults. In line with its long-lasting policy and practices, MSF refused to pay thieves to avoid theft and refrained from hiring armed protection services. For months, MSF teams expressed relief each time they passed through the aforementioned area approximately 800 metres from Kerem Shalom unscathed.

The period between end of September 2024 and the January 2025 ceasefire saw a particularly intense wave of robbery. In the less than four months, MSF reported 29 incidents in which supplies — valued at over €643,000 euros– were stolen.[71] Many of these incidents were perpetrated by armed individuals who used or threatened violence. Items such as food and soap were later sold at prices 10 to 20 times above market values, driven by extreme scarcity and desperation. There were rare instances of people returning stolen items to MSF, claiming that they had taken them to prevent others from doing so and saying "we stole for you."

The range of items stolen was extensive. It included medical drugs — from basic painkillers such as paracetamol and ibuprofen to antibiotics such as amoxicillin, azithromycin, metronidazole and erythromycin, as well as opioids such as tramadol and morphine. Hospital equipment taken included demountable hospital beds, radiation protection barriers, defibrillators, basic resuscitation tools, operating lights and operating tables, gynaecological and obstetric equipment, laboratory equipment, and physiotherapy and trauma care equipment; while more general equipment stolen included cold chain refrigerators, oxygen masks, nebulisers, glucometers, crutches, jerry cans, tents, plastic sheeting, blankets, sheets, towels, mattresses. Other stolen items included consumables such as stationery, emergency food rations and therapeutic nutrition supplies, hygiene products including soap, laundry detergent, nappies, menstrual pads, compresses, gauzes, catheters, cannulas, needles, syringes, gloves, surgical trousers and tunics, bandages and other dressing supplies, ferrous salt, sodium and Ringer's lactate

70 United Nations, "Daily press briefing by the Office of the Spokesperson for the Secretary-General", 28 April 2025, https://press.un.org/en/2025/db250428.doc.htm

71 A detailed list is provided in Annex 5.

solution, as well as diagnostic and testing supplies including hepatitis B and C tests, HIV tests — and much more.

Due to the extremely poor security situation in Gaza, MSF was forced to suspend supply operations in mid-November 2024. Supply activities resumed in early December, but handing only medical supplies, as thieves appeared less interested in these compared with logistical items. For more than a month after this partial resumption, MSF remained unable to send hygiene supplies or any logistical materials due to the looting risks. This interruption led to critical shortages of generator fuel, filters, and hygiene products for both patients and staff, severely affecting operational capacity.

The poor security and rampant theft consequent upon the collapse of public order presented major obstacles to MSF reaching affected populations. As the occupying power, the Israeli authorities bore responsibility for this situation. Their obligations extended beyond merely managing crossing points; they were responsible for ensuring that humanitarian actors could access and assist those in need, and they failed to do so.

III.vi. RESTRICTED ACCESS WITHIN THE STRIP

Movement within the Gaza Strip was challenging. Primarily this was due to the poor security situation, as there were no safe zones. However, movement was also hindered by the consequences of widespread and catastrophic destruction: massive piles of rubble, collapsed buildings, unexploded ordnance and severely damaged infrastructure. The roads were narrowed by tents and makeshift shelters. The limited number of passable roads and streets were heavily congested, and Gaza's extremely high population density only added to the difficulty. Humanitarian organisations have to move to deliver aid, but in Gaza every movement had to be slow and cautious.

All movements by humanitarian actors, including the transportation of supplies, ambulance movements, and even staff travel between shelters, health facilities and workplaces, had to be reported in advance to COGAT and approved. Israel presented this mandatory approval of movements as a required part of "deconfliction". Under international humanitarian law, both Israel and Palestinian armed groups were obliged to protect humanitarian aid and medical personnel. Deconfliction processes are designed to enable this protection — humanitarian organisations shared with COGAT and Palestinian armed actors the locations of medical facilities, staff houses and shelters, warehouses and other protected sites, and communicated their planned movements with both sides, in the expectation that measures would be taken to prevent harm to protected patients, personnel, facilities and transport.

In most contexts where MSF works, humanitarian notifications is a choice which serve to inform, not to seek permission — helping reduce the likelihood of accidental strikes or security incidents. In Gaza, however, as mentioned above, notification was mandatory, and intended movements once notified remained conditional upon mandatory approval, but attacks still occurred. In practice, the notification–approval tandem seemed to have more a pre-strike

warning function than a protective logic. Rather than taking steps to prevent attacks, these notifications were often used to identify humanitarian facilities, staff and transport in target areas to evacuate, suggesting that the purpose was not to avoid strikes, but to manage their impact.

Notification offered no guarantee that humanitarian facilities and transport would not be attacked. In November 2023, an MSF convoy was attacked, killing an MSF nurse,[72] and in the same month an attack on Al Awda hospital killed two MSF doctors.[73] The movement of the convoy was clearly notified, and MSF had regularly shared information about Al Awda as a functioning hospital, the presence of MSF staff and the facility's GPS coordinates, which were last shared just one day before the strike.[74] Such attacks, as well as being inexcusable, constituted a major barrier to the safe and timely delivery of humanitarian assistance.

MSF's Secretary General, Christopher Lockyear, stated that the pattern of attacks by Israeli forces against humanitarian workers, facilities and transport was "either intentional or indicative of reckless incompetence", and added: "It not only shows the failure of deconfliction measures; it shows the futility of these measures in a war fought with no rules. That these attacks on humanitarian workers are allowed to happen is a political choice. Israel faces no political cost."[75]

Since 7 October 2023, the number of humanitarian workers killed knows no precedent. UN Secretary General, António Guterres, said that "more than one in every 50 UNRWA staff in Gaza has been killed in this atrocious conflict. This is the highest staff death toll in United Nations history."[76] According to the UN, between 7 October 2023 and 1 April 2025, 408 aid workers, including more than 280 UNRWA staff, were killed in Gaza.[77] MSF has mourned the tragic loss of 11 staff who were killed during this period, many of them while providing care for patients or sheltering with their families.[78]

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72 MSF, "Gaza: MSF condemns deadly attack on convoy transporting staff and family members", 18 November 2023, https://www.msf.org/gaza-msf-condemns-deliberate-attack-convoy-transporting-staff-resulting-one-death-and-one-injury

73 MSF, "MSF doctors killed in strike on Al-Awda hospital in northern Gaza", 21 November 2023, https://www.msf.org/msf-doctors-killed-strike-al-awda-hospital-northern-gaza-palestine

74 MSF, "MSF doctors killed in strike on Al-Awda hospital in northern Gaza", 21 November 2023, https://www.msf.org/msf-doctors-killed-strike-al-awda-hospital-northern-gaza-palestine

75 Christopher Lockyear, "Why we won´t accept the narrative of 'regrettable incidents' in Gaza", *MSF*, 5 April 2024, https://www.msf.org/why-we-wont-accept-narrative-regrettable-incidents-gaza

76 *UN News*, "Number of aid workers killed in Gaza conflict, highest in UN history: Guterres", 5 June 2025, https://news.un.org/en/story/2025/06/1164086

77 *UN News*, "Gaza aid worker killings: One humanitarian still missing in mass grave", 1 April 2025, https://news.un.org/en/story/2025/04/1161736

78 MSF, "Remembering our colleagues killed in Gaza", updated 1 April4 July 2025, https://www.msf.org/remembering-our-colleagues-killed-gaza. A detailed list of violent incidents against MSF can be found at MSF, "Strikes, raids and incursions: Over a year of relentless attacks on healthcare in Palestine", 7 January 2025, https://www.msf.org/strikes-raids-and-incursions-year-relentless-attacks-healthcare-palestine

Access goes both ways. It was not only about the ability of humanitarian organisations to deliver aid, it was also about the ability of the population to reach that aid. Civilians faced immense challenges in accessing health services and aid distribution points due to ongoing security issues, as well as the lack of safe transport, infrastructure or other basic conditions that allow for movement.

Access to the north

Humanitarian operations in Gaza were severely obstructed during periods of military activity. However, movement restrictions were also imposed arbitrarily — without explanation or clear justification. In particular, access to the northern part of the Gaza Strip was very limited. The poor security situation and the lack of authorisation from Israeli authorities meant that only a small number of trucks were able to pass through military checkpoints and reach the north.

OCHA repeatedly reported this lack of access. A few illustrative examples follow:

- "North Gaza remains under a near-total siege. Since 1 December [2024, until 24 December], Israeli authorities have denied 48 of 52 UN attempts to coordinate humanitarian access, while four approved movements all faced impediments."[79]

- "Between 1 January and 15 February [2024], less than 20 per cent of missions (15 out of 77) planned by humanitarian partners to deliver aid and undertake assessments in areas to the north of Wadi Gaza were facilitated by the Israeli authorities fully or partially and 51 per cent were denied (39 out of 77). Facilitated missions primarily involved food distribution, while the access of missions to support hospitals and facilities providing water, hygiene and sanitation (WASH) services was among those overwhelmingly denied."[80]

- "So far in November [2024, reported 12 November], every attempt by the UN to access besieged areas of North Gaza governorate with food and health missions to support tens of thousands of people remaining there was either denied or impeded."[81]

79 OCHA, "Humanitarian Situation Update #249: Gaza Strip", 24 December 2024, https://www.ochaopt.org/content/humanitarian-situation-update-249-gaza-strip

80 OCHA, "Hostilities in the Gaza Strip and Israel: Flash Update #123", 21 February 2024, https://www.ochaopt.org/content/hostilities-gaza-strip-and-israel-flash-update-123

81 OCHA, "Humanitarian Situation Update #237: Gaza Strip", 12 November 2024, https://www.ochaopt.org/content/humanitarian-situation-update-237-gaza-strip

III.vii. UNRWA: CHOKING GAZA BY GETTING RID OF THE MAIN HUMANITARIAN ACTOR

"UNRWA is a lifeline for Palestinians," stated Christopher Lockyear, MSF Secretary General in October 2024.[82] As the largest health provider in the Gaza Strip, UNRWA is indispensable to the population and cannot readily be replaced. In August 2023, the agency employed more than 13,000 staff in Gaza and operated over 300 facilities.[83] These figures far surpassed those of other UN agencies such as the WFP, UNICEF and the WHO. According to UNRWA Commissioner-General Philippe Lazzarini, as of February 2025 the agency distributed around 50% of all aid in Gaza.[84] Many INGOs operating in the Strip relied on UNRWA for the implementation of their humanitarian activities. As MSF said in October 2024, UNRWA's health teams provided over 15,000 medical consultations a day across Gaza. It was the largest health provider, with over half of Gazans relying on UNWRA for essential healthcare services, including for the treatment of chronic diseases, maternal and child health, and vaccinations.[85]

Since long before 7 October 2023, UNRWA had been the target of an intense smear campaign by the Israeli authorities. However, after that date, the hostility by Isael directed at the agency escalated to the point of threatening its operational survival in the occupied Palestinian territory. Israel took a series of punitive actions: blocking major food shipments to UNRWA, revoking its UN tax exemptions, prohibiting its use of the port of Ashdod for imports, and tolerating open hostility, including attacks by Israeli residents on UNRWA Headquarters in occupied East Jerusalem.[86] In early 2024, critical funding cuts further undermined UNRWA's capacity — ironically, coinciding with the International Court of Justice's 26 January ruling, which issued provisional measures requiring Israel to facilitate the flow of humanitarian aid into Gaza.[87]

On 29 May, the Israeli Knesset passed a bill aimed at designating UNRWA as a terrorist organisation and another aimed at stripping the agency of its

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82 MSF, "Israeli UNRWA ban will deepen Palestinian humanitarian catastrophe", 29 October 2024, https://www.msf.org/israeli-unrwa-ban-will-deepen-palestinian-humanitarian-catastrophe

83 UNRWA, "Where we work: Gaza Strip", https://www.unrwa.org/where-we-work/gaza-strip, accessed 9 April 2024.

84 Andrés Ortiz, "Aid distribution in Gaza remains a challenge after the ceasefire: 'The trucks are coming in, but I don't know how to access them'", El País, 7 February 2025, https://english.elpais.com/international/2025-02-07/aid-distribution-in-gaza-remains-a-challenge-after-the-ceasefire-the-trucks-are-coming-in-but-i-dont-know-how-to-access-them.html

85 MSF, "Israeli UNRWA ban will deepen Palestinian humanitarian catastrophe", 29 October 2024, https://www.msf.org/israeli-unrwa-ban-will-deepen-palestinian-humanitarian-catastrophe

86 UNRWA, "This evening, Israeli residents set fire twice to the perimeter of the UNRWA Headquarters in occupied East Jerusalem", 9 May 2024, https://www.unrwa.org/newsroom/official-statements/evening-israeli-residents-set-fire-twice-perimeter-unrwa-headquarters

87 MSF, "MSF statement on cease of funding to UNRWA", 29 January 2024, updated 18 February 2025, https://www.doctorswithoutborders.ca/msf-statement-on-cease-of-funding-unrwa/

legal immunities. MSF stood in solidarity with UNRWA, describing these initiatives as "an outrageous attack on humanitarian assistance, and an act of collective punishment against the Palestinian people" that opened the door to the criminalisation of UNRWA and increased the risk of attack against its facilities, staff and patients.[88]

Further escalation followed on 28 October 2024, when the Knesset passed a law enforcing a "denial of contact" policy between Israeli officials and UNRWA staff. MSF strongly condemned the move, warning on its "catastrophic implications" for Palestinians in the occupied territory, "now and for generations to come".[89] In practice, this ban rendered it nearly impossible for UNRWA to operate: coordination with Israeli authorities was cut off, entrance permits denied and aid delivery obstructed. As MSF declared: "this vote adds to the endless physical and bureaucratic impediments imposed by Israel to limit the amount of aid reaching Gaza, and blatantly contradicts Israel's claims that it is facilitating humanitarian assistance into the Strip."[90]

The ban officially came into force in January 2025. UNRWA continued to operate in the Gaza Strip, but without international staff and under constant threat of being forced to shut down.

IV. Conclusions

In the period following the 7 October 2023 Palestinian armed attacks on Israel, MSF multiplied its efforts in the Gaza Strip, but it was unable to do as much as it might have done because of the deteriorating security situation, Israel's subordination of humanitarian needs to military and political objectives and, crucially, the restrictions that Israel imposed on the bringing of humanitarian aid supplies into Gaza.

88 MSF, "Proposal to designate UNRWA as a terrorist organisation an outrageous attack on humanitarian assistance", 30 May 2024, https://www.msf.org/israeli-proposal-designate-unrwa-terrorist-organisation-outrageous

89 MSF, "Israeli UNRWA ban will deepen Palestinian humanitarian catastrophe", 29 October 2024, https://www.msf.org/israeli-unrwa-ban-will-deepen-palestinian-humanitarian-catastrophe

90 MSF, "Israeli UNRWA ban will deepen Palestinian humanitarian catastrophe", 29 October 2024, https://www.msf.org/israeli-unrwa-ban-will-deepen-palestinian-humanitarian-catastrophe

In the immediate wake of the attacks, Israel prohibited entry into Gaza altogether, and when it started to allow aid in two weeks later it imposed a complex and time-consuming series of procedures for documentation and inspection of shipments entering through the one open crossing point at Rafah, Egypt. The importing of aid through this route was further hampered by the need to get permits for charter flights and cargos and the requirement for the supplies to be repacked and transported, which resulted in MSF being restricted to a wholly inadequate monthly allowance of goods. The Rafah crossing closed in May 2024 following Israel's offensive there, and MSF and other humanitarian organisations used other corridors to transit truckloads of supplies, via Egypt (through Kerem Shalom), overland across Israel via Jordan, and via Israel itself. Each suffered from its own unique mix of bureaucratic and logistical obstacles and was subject at different times to closure.

Further obstructions were posed by quotas for different categories of goods set by Israel; inadequate capacity at the Israeli inspection points for crossings via Rafah or the main Israeli crossing point at Kerem Shalom, which led to huge queues of vehicles and waits that could stretch into months (resulting in spoilage of temperature-sensitive goods); the need to unload shipments and reload them onto Palestinian trucks once they had passed through the Gaza border; the obstruction of aid convoys by Israeli citizens; the breakdown of order and security inside Gaza (exacerbated by the IDF's targeting of local police), which resulted in widespread robberies of aid trucks by organised criminals; and the difficulties and dangers of local access within a heavily damaged and active zone of military operations. Especially problematic was COGAT's sluggish and seemingly arbitrary system for the authorisation of specific items (including life-saving medical equipment), along with the extreme lack of clarity about which items were at risk of being excluded as 'dual-use' — supposedly able to be used for 'terrorist' purposes. Entire truckloads were frequently excluded because of a single item, and MSF resorted to the inefficient and time-consuming expedient of handling potentially 'dual-use' items separately.

As a result of all these sources of obstruction and delay, MSF was unable to bring into the Gaza Strip the full quantity and range of supplies that it needed to respond to the overwhelming humanitarian demand. It was consequently unable to provide either the volume or quality of assistance that would otherwise have been possible. While MSF managed to carry out 549,000 outpatient consultations, 124,300 emergency room consultations, 34,300 individual mental health sessions, 34,200 patient admissions and 11,700 surgeries, as well as assisting 8,900 births, during the period covered by this report, it could have done much more under better supply conditions. As it was, MSF was at times unable to provide such vital assistance as hygiene kits for postpartum mothers, therapeutic food for malnourished mothers and their infants, and critical water treatment supplies. Teams had to resort to improvisation, manufacturing items such as wheelchairs, beds and incubator covers locally from inadequate materials. Medical procedures often had to be carried out under shocking conditions, including a lack of anaesthesia for amputations.

Throughout this period the people whom MSF was attempting to assist remained trapped in Gaza, unable to flee — subjected to a form of collective torture in the open air, broadcast to the world by global media despite the Israeli authorities' restrictions on foreign reporters. Alongside the direct impact on the civilian population of Israel's bombs and bullets, the restrictions on the importing and distribution of humanitarian aid killed by suffocation. From 7 October 2023 to the 19 January 2025 ceasefire — the end of the period covered by the present report — this choking of the aid supply probably cost many people their lives.

After 19 January 2025

After the ceasefire came into force on 19 January 2025, the situation briefly improved. There was a dramatic increase in supply levels. But this respite was cut short on 2 March, when Israel imposed a new blockade on humanitarian and commercial goods,[91] followed on 18 March by its resumption of hostilities.[92] The blockade was eased slightly in late May, though the number of trucks entering Gaza was reported by WFP head Cindy McCain to be only around 100 a day,[93] and this figure increased scarcely, if at all, when Israel introduced "tactical pauses" in fighting in late July.[94] In the meantime a new Israeli government-controlled system of aid distribution by the Gaza Humanitarian Foundation (GHF), a controversial US agency, proved "a death trap costing more lives than it saves", according to UNRWA chief Philippe Lazzarini:[95] by late July, according to the UN, over 750 people had been killed by Israeli forces in under two months while attempting to collect food from GHF's four militarised distribution sites,[96] which replaced 400 non-militarised UN aid distribution points. MSF's emergency coordinator in Gaza, Aitor Zabalgogeazkoa, concluded: "this is not humanitarian aid", and added: "we can only think that it was designed to cause damage to the people seeking aid."[97] On 28 July the Ministry of Health announced that the death toll due

91 Astha Rajvanshi, "The World Food Programme has run out of food in Gaza", NBC News, 27 April 2025, https://www.nbcnews.com/world/gaza/world-food-programme-food-stocks-depleted-gaza-rcna203183

92 *The Times of Israel*, "Netanyahu's testimony in graft trial canceled for the day amid shock Gaza offensive", 18 March 2025, https://www.timesofisrael.com/netanyahus-testimony-in-graft-trial-canceled-for-the-day-amid-shock-gaza-offensive/

93 *CBS News*, "Aid trucks going into Gaza are a 'drop in the bucket as to what's needed,' WFP director says", 25 May 2025, https://www.cbsnews.com/news/aid-trucks-gaza-world-food-program-israel-hamas/

94 David Gritten and Graeme Baker, "Gaza experiencing 'real starvation', Trump says", *BBC News*, 28 July, https://www.bbc.com/news/articles/c62nr9rglm9o.amp

95 Kaamil Ahmed , Ana Lucía González Paz, Lucy Swan and Garry Blight, "Eleven-minute race for food: how aid points in Gaza became 'death traps' — a visual story", *The Guardian*, 22 July 2025, https://www.theguardian.com/global-development/2025/jul/22/food-aid-gaza-deaths-visual-story-ghf-israel

96 *Al Jazeera*, "Number of aid seekers killed by Israel in Gaza tops 1,000: UN", 22 July 2025, https://www.aljazeera.com/news/2025/7/22/un-says-israeli-military-killed-over-1000-seeking-gaza-aid-since-late-may

97 Kaamil Ahmed , Ana Lucía González Paz, Lucy Swan and Garry Blight, "Eleven-minute race for food: how aid points in Gaza became 'death traps' — a visual story", *The Guardian*, 22 July 2025, https://www.theguardian.com/global-development/2025/jul/22/food-aid-gaza-deaths-visual-story-ghf-israel

to Israel's military campaign had passed 60,000;[98] while the following day experts at the UN-backed Integrated Food Security Phase Classification announced that "the worst case scenario of famine" was now "playing out" in the territory.[99] All this occurs while Israel is carrying out a genocide and ethnic cleansing against the Palestinian population in Gaza.

In the face of this grim reality, and of extraordinary obstructions to its work, MSF continues to attempt to provide humanitarian assistance to the people of Gaza, despite the killing of twelve colleagues since 7 October 2023 and the increasing burden of hunger on humanitarian staff themselves.[100] MSF will also continue to document the obstacles that are put in the way of its humanitarian mission, as part of its commitment to bearing witness to the suffering, violence and neglect that it sees.

98 Mallory Moench, "More than 60,000 people killed in Gaza during Israel offensive, Hamas-run health ministry says", *BBC News*, 29 July 2025, https://www.bbc.co.uk/news/articles/cwyeg5x3nj0o

99 *UN News*, "In Gaza, mounting evidence of famine and widespread starvation", 29 July 2025, https://news.un.org/en/story/2025/07/1165517

100 MSF, "As mass starvation spreads across Gaza, our colleagues and those we serve are wasting away", 23 July 2025, https://www.msf.org/mass-starvation-spreads-across-gaza

Annexes

ANNEX 1.
TIMELINE OF EVENTS

The following list includes only events directly related to the supply of humanitarian goods to Gaza.

Date	*Supply*
In the aftermath of 7 October 2023	Following the attacks of Palestinian armed organisations and the subsequent military operations by the IDF, all crossings between Israel and Gaza are closed.
8 October 2023	Israel bans any importation or transit of good to Gaza through its territory. Rafah is left as the only option to enter the Strip. The Egyptian authorities start developing a system of procedures for supply.
9–10 October 2023	Israeli Minister of Defence Yoav Gallant states: "I have ordered a complete siege on the Gaza Strip. There will be no electricity, no food, no fuel, everything is closed. We are fighting human animals and we are acting accordingly."[101] The following day, IDF Major General Ghassan Alian, head of COGAT, says: "Human animals must be treated as such. There will be no electricity and no water [in Gaza], there will only be destruction. You wanted hell, you will get hell."[102]
21 October 2023	The first aid convoy since 7 October enters the Gaza Strip.
28 October 2023	Land incursion by the IDF into the Gaza Strip.
11 December 2023	Kerem Shalom opens as a second inspection point after Nitzana.
15 December 2023	Israel opens the crossing point at Kerem Shalom.
24 January 2024	Israeli groups such as Tsav 9, Warrior Mothers and Forum Tikva begin protests at Kerem Shalom, Nitzana and the port of Ashdod to impede the entry of humanitarian trucks into the Gaza Strip.
26 January 2024	The ICJ calls on Israel to "take immediate and effective measures to enable the provision of urgently needed basic services and humanitarian assistance".[103]

101 Emanuel Fabian, "Defense minister announces 'complete siege' of Gaza: No power, food or fuel", *The Times of Israel*, 9 October 2023, https://www.timesofisrael.com/liveblog_entry/defense-minister-announces-complete-siege-of-gaza-no-power-food-or-fuel/

102 Gianluca Pacchiani, "COGAT chief addresses Gazans: 'You wanted hell, you will get hell'", *The Times of Israel*, 10 October 2023, https://www.timesofisrael.com/liveblog_entry/cogat-chief-addresses-gazans-you-wanted-hell-you-will-get-hell/

103 International Court of Justice, "Order of 26 January 2024", document number 192-20240126-ORD-01-00-EN, 26 January 2024, https://www.icj-cij.org/node/203447

Date	*Supply*
February 2024	MSF starts to explore alternative options for supply via Jordan as an IDF offensive in Rafah appears imminent (it will ultimately begin in May), including via the logistics cluster and the Jordan Hashemite Charity Organization (JHCO).
February–April 2024	Occasional airdrops of food and humanitarian goods are carried out by US, Egyptian, Emirati, French and Jordanian planes.[104] On 8 March an airdrop kills five children.[105]
28 March 2024	The ICJ calls again on Israel to "take immediate and effective measures to enable the provision of urgently needed basic services and humanitarian assistance".[106]
30 April 2024	The first convoy is sent via the new Jordan–Gaza corridor.
1–9 May 2024	The Erez/Beit Hanoun crossing point is temporary opened (it has remained closed since 7 October 2023).
7 May 2024	Beginning of the Rafah offensive. Egypt protests at IDF deployment in Egyptian territory around Kerem Shalom and closes the border, including to humanitarian supplies. All trucks are completely blocked and there is no entry from Jordan or Israel. There are no supplies for three weeks, which increases pressure on Israel, including from the US. A new route in and out of Gaza through Kerem Shalom is approved, and also from Jordan to Kerem Shalom.
17 May 2024	The US JLOTS temporary floating pier in Gaza opens.
18 July 2024	The JLOTS closes.
2 October 2024	A total closure of routes into Gaza is imposed by the Israeli authorities for over two weeks.
13 October 2024	The US Secretaries of State and Defense issue a joint 30-day ultimatum to the Israeli government, demanding that it "surge all forms of humanitarian assistance" into the Gaza Strip and "end isolation of northern Gaza," warning that failure to comply could jeopardise military aid.[107]
16 November 2024	A 109-truck UN convoy of food supplies is subject to an armed hold-up. 97 truckloads are seized and drivers are forced at gunpoint to unload aid.[108]
19 January 2025	The ceasefire agreement comes into force.

104 Israel Defense Forces, "A Timeline of Our Humanitarian Aid Efforts", updated 12 November 2024, https://www.idf.il/en/mini-sites/israel-at-war/our-humanitarian-aid-efforts/a-timeline-of-our-humanitarian-aid-efforts/

105 Nasser Atta, Meredith Deliso and Samy Zayara, "5 children killed in humanitarian aid airdrop, Hamas-run Gaza Ministry of Health says", *ABC*, 9 March 2024, https://abcnews.go.com/International/gaza-children-killed-humanitarian-aid-airdrop/story?id=107927556

106 International Court of Justice, "Order of 28 March 2024", document number 192-20240328-ORD-01-00-EN, 28 March, https://www.icj-cij.org/node/203847

107 Tom Bateman and David Gritten, "US gives Israel 30 days to boost Gaza aid or risk cut to military support", *BBC News*, 16 October 2024, https://www.bbc.com/news/articles/c9wk0e8zey2o

108 Post on UNRWA X account, 18 November 2024, https://x.com/UNRWA/status/1858521152483705001

ANNEX 2.

ITEMS WITH THE LONGEST AVERAGE RESPONSE TIME TO MSF AUTHORISATION REQUESTS TO COGAT

(For each category, in the period covered in this report)

Medical items	COGAT status	Average response time (days)
Radiation shielding apron, frontal, 0.35mm Pb, L	Authorised	122
Radiation shielding apron, frontal, 0.35mm Pb, M	Authorised	122
Radiation shielding collar, 0.5mm Pb equivalent, w/collar	Authorised	122
Gonad radiation shielding apron, 0.5mm Pb equivalent, adult	Authorised	122
Gonad radiation shielding apron, 0.5mm Pb equivalent, child	Authorised	122
Freezing indicator (freeze tag) electronic	Authorised	111
THERMOMETER alcohol (Moëller 104614) -30°C-+50°C	Authorised	99
Ultrasound (Sonosite Edge 2) + Transducer rC60xi, armoured c.	Authorised	99
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 12, 01-22-12	Authorised	99
(conc. DeVilbiss 1025KS/DS) Filter compressor 1025D-682	Authorised	88
(conc. DeVilbiss 1025KS/DS) Pressure regulator 1025D-612	Authorised	88
(conc. DeVilbiss 1025KS/DS) Motherboard 1025D-622	Authorised	88
(fluid warm. Enthermics ivNow-3) Replacement switch 5018369	Authorised	88
(fluid warm. Enthermics ivNow-3) Heater plate 5028617	Authorised	88
(monitor Dinamap) BATTERY Pb 6V 3.2Ah, 2037103-016	Authorised	88
(suction pump Vario18) VACUUM REGULATOR 077.1745	Authorised	88
(suction pump Vario18) POWER SUPPLY AC/DC 077.1733	Authorised	88
BURNER, BUNSEN, butane/propane, Ø 13mm, pilot light	Authorised	88
MAGNETIC ROTATOR, heating, xmin. 2l, 50–60Hz 230V	Authorised	88

Logistical items	COGAT status	Average response time (days)
Solar panels for energy	Rejected	225

Medical items	COGAT status	Average response time (days)
(Delta Amplon RT-6K-EXTEND) ELECTRONIC UNIT	Rejected	149
(Delta Amplon RT-6K-EXTEND) BATTERY PACK, 20x9Ah	Rejected	149
FLOW METER	Authorised	128
Solenoid Driven Dosing Pump 5L/hrs @8bar	Authorised	128
PRESSURE GAUGE	Authorised	128
RO Controller	Authorised	128
Pressure Vessel coupling PN25 OD33.7mm	Authorised	128
HP LASERJET TONER 59A BLACK	Authorised	122
FIRE EXTINGUISHER CO_2, class B, 10kg	Authorised	122
FIRE EXTINGUISHER powder, class ABC, 25kg, on trolley	Authorised	122
FIRE EXTINGUISHER powder, class ABC, 10kg	Authorised	122
FIRE EXTINGUISHER powder, 1kg, for vehicles	Authorised	122
TEAM TENT dome type, 9.2m², for 3 persons	Authorised	121
MOSQUITO NET TENT 2 people + flysheet + groundsheet	Authorised	121
KIT SCREWING DRILLING PORTABLE + accessories	Authorised	120
(angle grinder) CUTTING DISK, Ø230mm, for metal	Authorised	120
JIGSAW cordless (Dexter) 18V, w/out battery	Authorised	120
MFH KIT WATER PRESSURISER	Rejected	120

Communications items	COGAT status	Average response time (days)
(Thuraya XT-PRO) DOCKING UNIT, fixed + 12V cable	Authorised	132
VSAT SET (Starlink Kit) high performance	Rejected	96
COMPUTER laptop (HP Pro/EBook 640 G10 i5) qwerty + access.	Authorised	93
UPS desktop computer, 300VA + battery & alarm	Authorised	87
ACCESS POINT (Meraki MR36) + subscription 3Y + cable	Rejected	80
MOBILE PHONE smartphone (Samsung Galaxy Xcover 7) SIM&eSIM	Authorised	62
AC BRIDGE outdoor (Ubiquiti AirMax PowerBeamAC Gen2)	Authorised	53
ROUTER (TP-Link TL-MR6400) 3G/4G, 300mb/s 2.4GHz	Authorised	51

Medical items	COGAT status	Average response time (days)
MOBILE PHONE smartphone (Samsung Galaxy A50) dual SIM	Authorised	46
ROUTER (TP-Link TL-MR6400) 3G/4G, 300mb/s 2.4GHz	Rejected	45
(Delta Amplon RT-10K 3ph/1ph) ELECTRONIC UNIT	Authorised	33
(Iridium 9505A/9555/9575) ANTENNA mobile, magnetic, small	Rejected	33

Description of items taken directly from the MSF datasets.

ANNEX 3.
MSF AUTHORISATION REQUESTS PENDING RESPONSE BY COGAT FOR 150 DAYS OR MORE AS OF 9 APRIL 2025

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
KIT, MOTOR PUMP, DIESEL, 62 m^3/h max, 28m max, 3"	2	12/4/2024	362	No	0	Yes	2	100%
GENERATOR (FG Wilson P33) 30kVA 400V 50Hz 3ph, diesel	1	19/4/2024	355	Yes	1	Yes	3	75%
SUBMERSIBLE PUMP (Grundfos SQ5-70) 230V	2	28/4/2024	346	Yes	1	Yes	1	50%
MOTOR PUMP petrol (Honda WH20DF) 35m^3/h. max. 45m, max. 2"	2	28/4/2024	346	Yes	1	Yes	1	50%
MODULE, AUTOCLAVE, STEAM, TBM 90l	2	28/4/2024	346	Yes	2	No	0	0%
GENERATOR (FG Wilson P33) 30kVA 400V 50Hz 3ph, diesel	2	28/4/2024	346	Yes	1	Yes	3	75%
(Sharp AH-XP18UHE) AIR CONDITIONER split type, 1.5T	2	28/4/2024	346	No	0	No	0	–

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
AUTOCLAVE TBM 90l, vertical, 220V/380V/ gas/kerosene, drying	1	5/5/2024	339	Yes	1	Yes	1	50%
AUTOCLAVE 39l (All American), w/o burner, int. Ø 35 cm	1	5/5/2024	339	Yes	1	Yes	4	80%
AUTOCLAVE 39l (All American), w/o burner, int. Ø 35 cm	1	5/5/2024	339	Yes	1	Yes	4	80%
AUTOCLAVE TBM 90l, vertical, 220V/380V/ gas/kerosene, drying	1	13/5/2024	331	Yes	1	Yes	1	50%
CPAP, complete with 10l concentrator (Diamedica)	4	13/5/2024	331	No	0	No	0	–
CONCENTRATOR O_2 (DeVilbiss 1025KS) 10l, 220V + access.	5	13/5/2024	331	Yes	1	Yes	11	92%
KIT MOTOPOMPE, ESSENCE, 30m³/h, 30m HMT(Koshin+Honda)	1	19/5/2024	325	No	0	No	0	–
KIT, PUMP, ELECTRICAL, SUBMERSIBLE (Grundfos SQ 3-105)	3	26/5/2024	318	No	0	No	0	–
KIT TRANSCEIV. SATELLITE BGAN Explorer 710	2	23/6/2024	290	Yes	2	No	0	0%
MODULE, AUTOCLAVE, STEAM, TBM 90l	4	23/6/2024	290	Yes	2	No	0	0%
CONCENTRATOR O2 (DeVilbiss 1025KS) 10l, 220V + access.	7	23/6/2024	290	Yes	1	Yes	11	92%
CONDUCTIVITY METER EC/TDS/temperature (HI98311)	8	8/7/2024	275	No	0	Yes	3	100%
CONCENTRATOR O2 (DeVilbiss 1025KS) 10l, 220V + access.	6	28/7/2024	255	Yes	1	Yes	11	92%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
CENTRIFUGE, electrical (Hettich EBA 200), 8 tubes, 230V	1	28/7/2024	255	No	0	Yes	1	100%
HAEMOGLOBIN PHOTOMETER (HemoCue Hb 301) tropicalised	10	28/7/2024	255	No	0	Yes	5	100%
AXILLARY CRUTCH, adult, adjustable length, 110–140cm	10	4/8/2024	248	No	0	Yes	14	100%
AXILLARY CRUTCH, adult, adjustable length, 130–150cm	10	4/8/2024	248	No	0	Yes	15	100%
SURGICAL SKIN STAPLE REMOVER, stainless steel, re-useable	10	4/8/2024	248	No	0	Yes	3	100%
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 11, 01-22-11	500	11/8/2024	241	No	0	Yes	14	100%
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 15, 01-22-15	1,000	11/8/2024	241	No	0	Yes	17	100%
AXILLARY CRUTCH, adult, adjustable length, 130–150cm	100	11/8/2024	241	No	0	Yes	15	100%
AXILLARY CRUTCH, child, adjustable height, 90–120cm	100	11/8/2024	241	No	0	Yes	9	100%
RAZOR, disposable	700	11/8/2024	241	No	0	Yes	12	100%
SKIN STAPLER, 35 regular staples, sterile, s.u.	410	11/8/2024	241	No	0	Yes	6	100%
FREEZER (Vestfrost MF214) 213l, 230V, upgrade	1	11/8/2024	241	No	0	Yes	4	100%
SCISSORS, for emergency case, plastic ring, 19cm	43	25/8/2024	227	No	0	Yes	11	100%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 15, 01-22-15	200	25/8/2024	227	No	0	Yes	17	100%
RAZOR, disposable	79	25/8/2024	227	No	0	Yes	12	100%
SKIN STAPLER, 35 wide staples , sterile, s.u.	50	25/8/2024	227	No	0	Yes	5	100%
Ugreen USB-C to Giga Ethernet Adapter	10	26/8/2024	226	No	0	No	0	–
ACCESS POINT outdoor (Meraki MR78) + cable	6	26/8/2024	226	No	0	No	0	–
ACCESS POINT (Meraki MR46) + cable	10	26/8/2024	226	No	0	No	0	–
FIREWALL/ROUTER (Meraki MX68) + subscription + cable	4	26/8/2024	226	No	0	No	0	–
FIREWALL/ROUTER (Meraki MX75) + subscription + cable	2	26/8/2024	226	No	0	No	0	–
one LMR 195 SLL 50 OHM cable + 20 connectors, 50m cable	50	26/8/2024	226	No	0	Yes	7	100%
(Icom IC-SAT100) CAR CHARGER 12V	25	29/9/2024	192	No	0	No	0	–
(Icom IC-SAT100) SPARE BATTERIE	10	29/9/2024	192	No	0	No	0	–
TABLE, EXAMINATION, demountable. or fold., adjustable head lift	1	29/9/2024	192	No	0	No	0	–
ELECTRONIC	20	29/9/2024	192	No	0	No	0	–
I.U.D. FITTING SET, 7 instruments	9	29/9/2024	192	No	0	Yes	8	100%
OTOSCOPE, halogen + SPECULA	3	29/9/2024	192	No	0	Yes	8	100%
BED, FIELD HOSPITAL, demountable, 200 x 75 x 80cm	20	29/9/2024	192	No	0	Yes	1	100%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
DRESSING TROLLEY, dismountable, 2 shelves + accessories	7	29/9/2024	192	No	0	Yes	5	100%
(Paediatric distributor Sureflow) HUMIDIFIERS KIT	3	29/9/2024	192	No	0	No	0	–
NEWBORN-INFANT BED, transparent, 4 collapsible walls	10	29/9/2024	192	No	0	Yes	3	100%
FREEZING INDICATOR (Freeze-tag) electronic	20	29/9/2024	192	No	0	No	0	–
CPAP, complete with 10l concentrator (Diamedica)	3	29/9/2024	192	No	0	No	0	–
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 11, 01-22-11	100	29/9/2024	192	No	0	Yes	14	100%
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 11, 01-22-11	100	29/9/2024	192	No	0	Yes	14	100%
CONDUCTIVITY METER EC/TDS/temperature (HI98311)	3	29/9/2024	192	No	0	Yes	3	100%
SODIUM METER (LAQUA Twin B-722)	3	29/9/2024	192	No	0	Yes	1	100%
GLUCOMETER, blood glucose monitor (StatStrip Xpress) mg/dl	5	29/9/2024	192	No	0	Yes	12	100%
SKIN STAPLER, 35 regular staples, sterile, s.u.	240	29/9/2024	192	No	0	Yes	6	100%
RAZOR, disposable	1,600	29/9/2024	192	No	0	No	0	–
SCISSORS, blunt/blunt, straight, DRESSING, 14.5cm 03-02-14	3	29/9/2024	192	No	0	Yes	8	100%
(scalpel nº 4) BLADE, s.u., sterile, nº 22, 01-22-22	4,400	29/9/2024	192	No	0	Yes	20	100%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 15, 01-22-15	100	29/9/2024	192	No	0	No	0	–
SKIN STAPLER, 35 wide staples, sterile, s.u.	48	29/9/2024	192	No	0	Yes	5	100%
EXTERNAL FIXATOR SET, Orthofix Galaxy, re-stocking	10	29/9/2024	192	No	0	Yes	6	100%
TABLE, MAYO, on castors	2	29/9/2024	192	No	0	Yes	5	100%
DRESSING TROLLEY, dismountable, 2 shelves + accessories	2	29/9/2024	192	No	0	Yes	5	100%
AXILLARY CRUTCH, adult, adjustable length, 130–150cm	9	29/9/2024	192	No	0	No	0	–
ELBOW CRUTCH, child, adjustable length	17	29/9/2024	192	No	0	Yes	13	100%
ELBOW CRUTCH, adult, adjustable length	80	29/9/2024	192	No	0	Yes	16	100%
MONITOR, multiparameter (B125)+ accessories, 230V	36	29/9/2024	192	No	0	Yes	3	100%
SYRINGE PUMP (AGILIA SP MC Z018689), single syr., drug lib. EN	25	29/9/2024	192	No	0	Yes	6	100%
INFUSION PUMP (Agilia VP Z019589) 100–240V 50/60Hz EN	1	29/9/2024	192	No	0	Yes	3	100%
CHLORINE, 1g (NaDCC / dichloroisocyan. sodium 1.67g), tab.	3,600	29/9/2024	192	No	0	Yes	3	100%
GLUCOMETER, blood glucose monitor (StatStrip Xpress) mg/dl	5	29/9/2024	192	No	0	Yes	12	100%
HEADLAMP, high performance >1000lm, medical use, battery	2	29/9/2024	192	Yes	1	Yes	2	67%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
TABLE, DELIVERY, dismountable 02.2862.00MSF 2016	1	29/9/2024	192	No	0	Yes	3	100%
EXAMINATION LIGHT (LID Bella 17650DI), mobile, 110–230 V	2	29/9/2024	192	No	0	Yes	8	100%
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 11, 01-22-11	1,000	29/9/2024	192	No	0	Yes	14	100%
DRAINAGE, THORACIC, complete set, sterile, s.u., CH24	36	29/9/2024	192	No	0	Yes	1	100%
INFANT WARMER (Ceratherm 600-3), mobile	1	29/9/2024	192	No	0	Yes	2	100%
TABLE, EXAMINATION, demountable. or fold., adjustable head lift	1	29/9/2024	192	No	0	Yes	7	100%
TABLE, MAYO, on castors	2	29/9/2024	192	No	0	Yes	5	100%
STAND, INFUSION, 2 hooks, on castors	2	29/9/2024	192	No	0	No	0	–
THERMOMETER, ELECTRONIC, accuracy 0.1°C + case	50	29/9/2024	192	No	0	Yes	5	100%
SCISSORS, OPER. DEAVER, sharp/blunt, 14cm straight 03-08-14	30	29/9/2024	192	No	0	Yes	6	100%
FORCEPS, HAEMOST., PEAN, 14cm, straight 16-10-14	10	29/9/2024	192	No	0	Yes	4	100%
PULSE OXIMETER (Masimo RAD-5) + accessories	2	29/9/2024	192	No	0	Yes	10	100%
(mod hospital) GYNAECO/OBSTETRIC MATERIAL VERSION B	1	29/9/2024	192	No	0	No	0	–
FOETAL DOPPLER SYSTEM, ultrasonic (Sonotrax)	1	29/9/2024	192	No	0	Yes	9	100%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
FORCEPS, DRESSING, CHERON, 25cm 19-28-75	2	29/9/2024	192	No	0	Yes	2	100%
DELIVERY & EPISIOTOMY SET, 7 instruments	4	29/9/2024	192	No	0	Yes	3	100%
FORCEPS, MUSEUX, 24cm, straight, 10mm, 2x2 teeth 52-48-03	1	29/9/2024	192	No	0	No	0	–
FORCEPS, POZZI, tenaculum, 25cm, straight 52-44-50	1	29/9/2024	192	No	0	No	0	–
HAEMOGLOBIN PHOTOMETER (HemoCue Hb 301) tropicalised	3	29/9/2024	192	No	0	Yes	5	100%
(dermatome Acculan 3Ti) BATTERY NIMH GA666	1	29/9/2024	192	No	0	No	0	–
SURGICAL SKIN STAPLE REMOVER , stainless steel, re-useable	10	29/9/2024	192	No	0	Yes	3	100%
TEMPERATURE RECORDER (LogTag TRIL-8) -80°C to +40°C	18	29/9/2024	192	No	0	Yes	1	100%
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 15, 01-22-15	1,000	29/9/2024	192	No	0	Yes	17	100%
(EZ-IO) DRILL, sealed battery operated, ref 9058	1	29/9/2024	192	No	0	Yes	5	100%
DRAINAGE, THORACIC, complete set, sterile, s.u., CH14	17	29/9/2024	192	No	0	Yes	1	100%
(scalpel nº 4) BLADE, s.u., sterile, nº 22, 01-22-22	2	29/9/2024	192	No	0	Yes	20	100%
BED, HOSPITAL, manual, with back rest	30	29/9/2024	192	No	0	Yes	1	100%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
STRETCHER, foldable along length/width, alu, 4 feet, 215x58cm	1	29/9/2024	192	No	0	Yes	6	100%
BEDSIDE SCREEN, foldable, washable, wheels, 180cm, 4 panels	20	13/10/2024	178	No	0	No	0	–
BATTERIES/AAA	100	13/10/2024	178	No	0	Yes	1	100%
BATTERIES/AA	100	13/10/2024	178	No	0	Yes	5	100%
FILING CABINET 4 drawers, metal, approx 132x47x60cm	10	13/10/2024	178	No	0	No	0	–
INSECT KILLER electrical, 150m², UV light	30	13/10/2024	178	No	0	No	0	–
PAPER SHREDDER model A4, small office	1	13/10/2024	178	No	0	Yes	2	100%
TORCH LAMP pen light, 2xR6/AA batteries	10	13/10/2024	178	No	0	Yes	5	100%
Tyres Cooper 285/70R18	15	13/10/2024	178	No	0	No	0	–
(LC300 armoured) RUN FLAT INSERTS on wheel rim, pc	6	13/10/2024	178	No	0	No	0	–
(LC300 armoured) RIM, 18”	6	13/10/2024	178	No	0	No	0	–
Valves	15	13/10/2024	178	No	0	No	0	–
Repair kit punctures	3	13/10/2024	178	No	0	No	0	–
Wheel assembly charges	6	13/10/2024	178	No	0	No	0	–
Shock absorber front	6	13/10/2024	178	No	0	No	0	–
Shock absorber rear	6	13/10/2024	178	No	0	No	0	–
Front brake pad	3	13/10/2024	178	No	0	No	0	–
Rear brake pad	3	13/10/2024	178	No	0	No	0	–
Gas shock 350NM	3	13/10/2024	178	No	0	No	0	–
Gas shock 500NM	3	13/10/2024	178	No	0	No	0	–
Gas shock 1200NM	3	13/10/2024	178	No	0	No	0	–

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
Door belt front	3	13/10/2024	178	No	0	No	0	–
Door belt rear	3	13/10/2024	178	No	0	No	0	–
Door brackets	3	13/10/2024	178	No	0	No	0	–
Oil filter	6	13/10/2024	178	No	0	No	0	–
Air filter	3	13/10/2024	178	No	0	No	0	–
Transmission gasket	3	13/10/2024	178	No	0	No	0	–
Transmission filter (strain assy)	3	13/10/2024	178	No	0	No	0	–
Fuel filter	6	13/10/2024	178	No	0	No	0	–
Engine belt	3	13/10/2024	178	No	0	No	0	–
Mega fuse 300 Amps	6	13/10/2024	178	No	0	No	0	–
STRAY PROJECTILE PROTECTION MEMBRANE 320x306cm + fixing	86	13/10/2024	178	No	0	No	0	–
CLOCK wall, indicating seconds	4	13/10/2024	178	No	0	No	0	–
PUMP, 230V, 40l/mn, for diesel + counter + accessories, set	1	20/10/2024	171	No	0	No	0	–
(pump, 230V, 40l/mn, for diesel) VANE & SEAL KIT	1	20/10/2024	171	No	0	No	0	–
(manual fuel pump) FILTER water retention (Hydrosorb)	2	20/10/2024	171	No	0	No	0	–
AUTOCLAVE TBM 90l, vertical, 220V/380V/ gas/kerosene, drying	1	20/10/2024	171	Yes	1	Yes	1	50%
ULTRASOUND (Sonosite Edge 2) + TRANSDUCER rC60xi, armoured c.	1	10/11/2024	150	No	0	Yes	1	100%
CONCENTRATOR O2 (DeVilbiss 1025KS) 10l, 220V + access.	3	10/11/2024	150	Yes	1	Yes	11	92%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
SUCTION PUMP, ELECTRICAL (Medela Vario18), 100–230V,50–60Hz	2	10/11/2024	150	No	0	Yes	9	100%
CHLORINE NaDCC, 1kg, granules, pot	294	10/11/2024	150	No	0	Yes	15	100%
FREEZING INDICATOR (Freeze-tag) electronic	3	10/11/2024	150	No	0	Yes	2	100%
TEMPERATURE RECORDER (LogTag TRIX-8) multi-use	3	10/11/2024	150	No	0	Yes	1	100%
SCISSORS, for emergency case, plastic ring, 19 cm	30	10/11/2024	150	No	0	Yes	11	100%
MOBILE MEDICAL BAG KIT, rucksack	4	10/11/2024	150	No	0	No	0	–
MOBILE MEDICAL BAG KIT, rucksack	4	10/11/2024	150	No	0	No	0	–
FIRST AID KIT, for vehicle	5	10/11/2024	150	No	0	No	0	–
KIT TRIAGE MULTIPLE CASUALTY INCIDENT, 260 casualties	2	10/11/2024	150	No	0	No	0	–
(mod triage MCI) FIRST STEP CASUALTY INCIDENT	1	10/11/2024	150	No	0	No	0	–
MODULE, DRESSING, 50 dressings	9	10/11/2024	150	No	0	No	0	–
TABLET CUTTER, stainless steel blade	15	10/11/2024	150	No	0	Yes	7	100%
RAZOR, disposable	900	10/11/2024	150	No	0	Yes	12	100%
PULSE OXIMETER (Masimo RAD-5) + accessories	8	10/11/2024	150	No	0	Yes	10	100%
HAEMOGLOBIN PHOTOMETER (HemoCue Hb 301) tropicalised	8	10/11/2024	150	No	0	Yes	5	100%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
FORCEPS, HAEMOST. KOCHER, 14 cm, 1x2 teeth straight 16-12-14	20	10/11/2024	150	No	0	Yes	4	100%
SCALPEL HANDLE, nº4 standard 01-28-04	20	10/11/2024	150	No	0	Yes	1	100%
DELIVERY & EPISIOTOMY SET, 7 instruments	12	10/11/2024	150	No	0	Yes	3	100%
DRESSING SET, 3 instruments, w/o box	36	10/11/2024	150	No	0	Yes	5	100%
ABSCESS SUTURE SET, 7 instruments, w/o box	17	10/11/2024	150	No	0	Yes	6	100%
I.U.D. FITTING SET, 7 instruments	15	10/11/2024	150	No	0	Yes	8	100%
SCALE, SALTER TYPE, 0-25 kg, no trousers, grad. 100 g	5	10/11/2024	150	No	0	Yes	1	100%
SCALE, electronic, mobile, 2 displays, mother–child 50g/200kg	8	10/11/2024	150	No	0	Yes	3	100%
SCOOP STRETCHER, with straps	2	10/11/2024	150	No	0	Yes	2	100%
FORCEPS, MAGILL, adult, 24 cm	2	10/11/2024	150	No	0	Yes	3	100%
RING CUTTER, 16 cm, with blade	2	10/11/2024	150	No	0	Yes	2	100%
TABLE, EXAMINATION, dismount. or fold., adjustable head lift	20	10/11/2024	150	No	0	Yes	7	100%
LARYNGOSCOPE FO (fibreoptic) + 7 blades	2	10/11/2024	150	No	0	Yes	2	100%
FORCEPS, HAEMOST., PEAN, 14 cm, straight 16-10-14	25	10/11/2024	150	No	0	Yes	4	100%
FORCEPS, DRESSING, CHERON, 25 cm 19-28-75	15	10/11/2024	150	No	0	Yes	2	100%

Item name	Quantity requested	Submission date	Request pending for (days)	Had the item previously been rejected?	Number of requests rejected	Had the item previously been authorised?	Number of requests approved	Percentage of requests approved
(scalpel nº 3 and 7) BLADE, s.u., sterile, nº 12, 01-22-12	300	10/11/2024	150	No	0	Yes	1	100%
SCISSORS, OPER. DEAVER, sharp/blunt, 14 cm straight 03-08-14	65	10/11/2024	150	No	0	Yes	6	100%
CHOLERA BED foldable, PVC, with hole + durable mat	1	10/11/2024	150	No	0	No	0	–
SCALE, electronic, mobile, 2 displays, mother–child 50g/200kg	5	10/11/2024	150	No	0	Yes	3	100%
EXTERNAL FIXATOR SET, hoffman3 kit (A) 4922-9-940s	4	10/11/2024	150	No	0	No	0	–
EXTERNAL FIXATOR SET, hoffman3 kit (B) 4922-9-941s	4	10/11/2024	150	No	0	No	0	–
SCISSORS, blunt/blunt, straight, DRESSING, 14.5 cm 03-02-14	40	10/11/2024	150	No	0	Yes	8	100%

Description of items taken directly from the MSF datasets.

ANNEX 4.

POTENTIAL DUAL-USE ITEMS FOR WHICH MSF REQUESTED AUTHORISATION AND THAT WERE BOTH AUTHORISED AND REJECTED AT DIFFERENT TIMES

(During the period covered in this report)[109]

Item name	Number of requests rejected by COGAT	Number of requests approved by COGAT	Percentage of requests approved	Quantity in the approved and rejected requests
(Icom IC-SAT100) ANTENNA (AH-40)	3	1	25%	65
(Purichem) Reverse osmosis system	3	3	50%	6
300Mbps Wireless N 4G LTE router TL-MR100	1	1	50%	2
ABC powder 6kg (dry powder)	1	1	50%	55
Armoured vehicles	1	4	80%	5
AUTOCLAVE 39l (All American), w/o burner, int. Ø 35 cm	1	4	80%	9
AUTOCLAVE TBM 90l, vertical, 220V/380V/gas/ kerosene, drying	1	1	50%	3
BATTERY (Optima Yellow Top D31) AGM, 12V/75Ah/975A, sealed	4	2	33%	62
BATTERY (Optima Yellow Top D34) AGM, 12V/55Ah/690A, sealed	1	2	67%	6
COMPUTER laptop (HP ProBook 640 G10 i5) qwerty + accessories	1	1	50%	4
Computer laptop EliteBook 640 G9 i5 qwerty + accessories, bag, mouse, locker and keyboard	1	1	50%	10
CONCENTRATOR O2 (DeVilbiss 1025KS) 10l, 220V + access.	1	11	92%	57
EXTENSION CABLE, 3G2.5²/10m, IP20, plug type E	1	1	50%	4

109 Only the period covered in this report is considered, and the data reflects the situation at the end of that period. Therefore, if an item was initially rejected but later approved in a subsequent request submitted after the period, this change is not reflected in the table. The table lists the potential dual-use items that were authorised on at least one occasion while also being rejected on at least one other occasion. The "quantity" of items column may also include requests that were still pending a decision at the end of the period considered. A request may include one or several items.

Item name	Number of requests rejected by COGAT	Number of requests approved by COGAT	Percentage of requests approved	Quantity in the approved and rejected requests
FIRE EXTINGUISHER automatic, powder, class ABC, 6kg	1	1	50%	25
FIRE EXTINGUISHER multi-purpose powder, 6kg, for warehouse	1	1	50%	55
Galvanised welded wire mesh roll 2.5m h (1,000m)	1	3	75%	8
GENERATOR (FG Wilson P33) 30kVA 400V 50Hz 3ph, diesel	1	3	75%	7
HEADLAMP, high performance >1000lm, for medical use, battery	1	2	67%	17
HOLESAW CHUCK, Ø22-64mm + blades & pilot drill, 609A.J1	1	1	50%	51
LANDCRUISER 4x4 (HZJ78) 11 seats, diesel LHD hard-top	1	6	86%	16
Mesh bag for reverse osmosis system Aquifer 4000	3	3	50%	6
MODULE, AUTOCLAVE, STEAM, 39 l	1	2	67%	5
MODULE, MAINTENANCE, 10 services, for HZJ78-79	1	2	67%	15
MOTOR PUMP petrol (Honda WH20DF) 35m3/h. max. 45m, max. 2"	1	1	50%	3
MOTOR PUMP, DIESEL, 62 m3/h max, 28m max, 3"	1	1	50%	10
PLASTIC SHEETING, 4x60m, white/white, 6 bands, roll	1	1	50%	5
Purichem Desalination kit 1.5m3/h	3	3	50%	6
Purichem Desalination kit 2.5m3/h	3	3	50%	6
ROUTER (TP-Link TL-MR6400) 3G/4G, 300mb/s 2.4GHz	1	1	50%	5
SATELLITE COMMUNICATOR compact (Garmin inReach Mini 2)	1	2	67%	7
SATELLITE PHONE (Icom IC-SAT100) PTT + battery	3	1	25%	65
SHEET plain, iron 2X1m, 2mm thick	1	3	75%	4
SHEET plain, iron 2X2m, 2mm thick	1	3	75%	4
SUBMERSIBLE PUMP (Grundfos SQ5-70) 230V	1	1	50%	3
Toyota Land Cruiser 300 series — Armouring description (Bulletproof Level): VR7 LEVEL	1	4	80%	1
WIRE, galvanised steel, Ø 1.1mm, roll of 50m	1	3	75%	13

ANNEX 5.
MSF'S STOLEN SUPPLIES FROM 26 SEPTEMBER 2024 TO 19 JANUARY 2025

Date	Shipment from	Destination in Gaza	Value of goods stolen (€)	Examples of stolen items
26 Sep 24	Egypt	South	20,352.68	Relief items including soap, hygiene materials, buckets, lamps, cleaning equipment.
1 Oct 24	Israel	South	28,204.52	Various drugs including antibiotics, surgical clothes, emergency food rations, disposable nappies, menstrual pads, hepatitis B tests, auxiliary crutches, nebulisers.
6 Oct 24	Egypt	South	26,298.81	Tents, plastic sheeting, various drugs including tramadol, emergency and therapeutic food, dressing materials, hepatitis C tests.
10 Oct 24	Egypt	South	22,044.11	Dressing equipment, nebulisers, various drugs, rapid diagnostic tests, glucometers.
13 Oct 24	Israel	South	2,932.98	Various hygiene products and relief items.
13 Oct 24	Egypt	South	4,132.10	Blankets, mattresses, sheets.
20 Oct 24	Egypt	South	1,131.34	Drugs, dressing material, gloves.
22 Oct 24	Israel	South	1,657.40	Various drugs including tramadol and painkillers, compresses, catheters.
30 Oct 24	Egypt	South	110,961.74	Large quantities of therapeutic food and drugs including painkillers and antibiotics, oral salts, detergent/ disinfectants, HIV and hepatitis tests, dressing material.
30 Oct 24	Israel	South	4,182.08	Auxiliary crutches and other orthopaedic material.
31 Oct 24	Egypt	South	955.85	Injectable medicines.
5 Nov 24	Egypt	South	2,504.83	Vehicle filters, bulbs for revolving light, ratchet tie-down straps and other vehicle accessories.
11 Nov 24	Egypt	South	13,236.45	Dressing material, injection supplies, infusion bags for medical ward, bone surgery sets.
11 Nov 24	Jordan	North	30,657.02	Auxiliary and elbow crutches and accessories, various drugs including antibiotics, salts.
13 Nov 24	Israel	South	3,486.85	Various drugs including clindamycin, dressing material.
8 Dec 24	Egypt	South	45,948.79	Large quantities of antibiotics, other drugs, oximeters, nasal prongs, cannulas.
11 Dec 24	Israel	South	1,410.60	Various drugs including painkillers.
22 Dec 24	Egypt	South	33,523.10	Various drugs including antibiotics and painkillers.

Date	Shipment from	Destination in Gaza	Value of goods stolen (€)	Examples of stolen items
24 Dec 24	Egypt	South	37,367.39	Large quantities of tramadol, various other drugs including painkillers, permethrin, masks.
24 Dec 24	Egypt	South	16,965.05	Various drugs including painkillers and antibiotics.
25 Dec 24	Egypt	South	23,155.16	Large quantities of paracetamol, various other drugs, permethrin.
29 Dec 24	Egypt	South	164,603.35	A digital imaging scanner, an operating table and light, recovery equipment, radiation protection barriers, x-ray stations, hospital modules for dressing, medical, laboratory and resuscitation equipment, obstetric equipment, cold chain refrigerators, different types of drugs, defibrillators.
29 Dec 24	Egypt	South	28,192.09	Various drugs including painkillers and antibiotics.
12 Jan 25	Egypt	South	1,357.48	Office equipment and stationery.
12 Jan 25	Egypt	South	1,099.61	Various drugs, dressing material.
13 Jan 25	Jordan	South	102.04	Dressing material.
13 Jan 25	Israel	South	3,498.03	Various drugs, dextrose, sodium, permethrin.
19 Jan 25	Israel	South	12,558.15	Water pressure gauges, water flow meters, dosing pumps, drugs, refuse bags.
22 Jan 25	Israel	South	1,184.81	Surgical clothes, syringes.


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